

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000019572

FILED  
Mar 19, 2002 8:00 AM  
Secretary of State

Entity Name: ALONZO MOURNING FOUNDATION, INC.

## Current Principal Place of Business:

2911 GRAND AVE STE 3A  
COCONUT GROVE, FL 33133 US

## New Principal Place of Business:

5835 BLUE LAGOON DRIVE  
4TH FLOOR  
MIAMI, FL 33126 US

## Current Mailing Address:

5515 SECURITY LANE  
#1103  
ROCKVILLE, MD 20852 US

## New Mailing Address:

PO BOX 2226  
ROCKVILLE, MD 20847-222 US

FEI Number: 65-0777544

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KAMENESH, PETER Z  
3225 AVIATION AVE  
#700  
COCONUT GROVE, FL 33133 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: MOURNING, ALONZO  
Address: 5515 SECURITY LANE #1103  
City-St-Zip: ROCKVILLE, MD 20852 5

Title: DV ( ) Delete  
Name: FURST, ALLEN S  
Address: 5515 SECURITY LANE #1103  
City-St-Zip: ROCKVILLE, MD 20852 5

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: MOURNING, ALONZO  
Address: 3525 ANCHORAGE WAY  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: DV (X) Change ( ) Addition  
Name: FURST, ALLEN S  
Address: 25 HOLLYBERRY COURT  
City-St-Zip: ROCKVILLE, MD 20852 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALLEN S FURST

DV

03/19/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date