2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 15, 2001 8:00 am DOCUMENT # P97000078631 Secretary of State 1. Entity Name THE SPANISH UNIVERSITY OF AMERICA FOUNDATION, IN 02-15-2001 90022 040 ***150 00 Mailing Address Principal Place of Business 2198 NORTHWEST 57 STREET 2198 NORTHWEST 57 STREET **BOCA RATON FL 33496 BOCA RATON FL 33496** Principal Place of Business 3. Mailing Address Suite, Apt. #, etc2 DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Applied For FEI Number City & State 65-0825444 Not Applicable \$8.75 Additional Zip Country Certificate of Status Desired Fee Required 7.- Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ---Name BETTINGER, ROBERT Street Address (P.O. Box Number is Not Acceptable) 2198 NORTHWEST 57 STREET **BOCA RATON FL 33496** Zip Code ent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. entity submits this stater 8. The above SIGNATU FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change Addition TITLE Delete **PSTD** TITLE NAME NAME BETTINGER, ROBERT STREET ADDRESS STREET ADDRESS 2198 NORTHWEST 57 STREET CITY-ST-ZIP CITY-ST-ZIP BOCA RATON FL 33496 ☐ Addition Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE - - ---Change - Addition - Delete ---TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the economy or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if with all other ke empowered. changed, or on an attag

CITY-ST-ZIP

SIGNATURE