FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90249 031 ***150.00

DOCUMENT # P98000020471

FOUNDATIONS OF BROWARD, INC.

Principal Place of Business		Mailing Address			i i i i i i i i i i i i i i i i i i i	
1391-1401 NE 15 STREET FT LAUDERDALE FL 33305		1391-1401 NE 15 STREET FT LAUDERDALE FL 33305				
					DO NOT WRITE IN THIS SPACE	
	***				3. Date Incorporated or Qualifed	
					1	
2. Driverie el D	Name of Propinson	2a. Mailing Address			03/02/1998 4. FEI Number Applied For	
2. Principal Place of Business		⊢			65 0820160 Not Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.			\$8.75 Additional	
22)		27	¬ ''		5. Certificate of Status Desired Fee Required	
City & State			- City & State		6. Election Campaign Financing \$5.00 May Be	ےنہ
23			28		Trust Fund Contribution Added to Fees	
Zip Country		Zip .			8. This corporation owes the current year Intangible	
24	25	29	30		Personal Property Tax.	
-31	9. Name and Address of Curren				10. Name and Address of New Registered Agent	
			1	81 Name		
FER	GUSON, JOHN		H	82 Street A	ddress (P.O. Box Number is Not Acceptable)	
1391-1401 NE 15 STREET				ou con	dress (1.5. box rediffer is received plants)	
FT L	AUDERDALE FL 33305		[7	83		
			-	84 City	85 Zip Code	
			ľ	City	FL •• ••	
office or a agent. I a SIGNATURE	an familiar with and accept the obligat	tions of, Section 607.0505, Flor	nda Statur	es.	ation's board of directors. I hereby accept the appointment as registered 128 9 9	á
12.	OF NEERS AN	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	4,0
TITLE	D .	☐ DELETE	1.1 TITE	E	☐ Change ☐ Addition	7
NAME	FERGUSON, JOHN		1.2 NAM	1E	·	5
STREET ADDRESS	1391-1401 NE 15 STREET		1.3 STR	EET ADDRESS		Ü
CITY-ST-ZIP	FT LAUDERDALE FL 33305		_	/-ST-ZIP		ò
TITLE		DELETE	2.1 TITL		Change Addition	`
NAME			2.2 NAM	4E	ł	
STREET ADDRESS			2.3 STR	EET ADDRESS	Ì	
_CITY_ST-ZIP				Y-ST-ZIP	Change Addition	
TITLE		DELETE"	3.1 TITL		[2] Auditoria	~
NAME			3.2 NAA	1		
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP			3.4. CIT	Y-ST-ZIP	☐ Change ☐ Addition	
TITLE	1	D per ett				
NAME	Į.	☐ DELETE	4.1 TITL	1		
STREET ADDRESS	,	DELETE	4. 2 NA	ME	□ Strange □ Addition	
		DELETE	4. 2 NA 4.3 STF	ME LEET ADDRESS	☐ Shange ☐ Addition	
CITY-ST-ZIP	,	· .	4. 2 NA 4.3 STF 4.4 CIT	ME LEET ADORESS (-ST-ZIP	· .	
TITLE	,	DELETE	4. 2 NA 4.3 STF 4.4 CIT	ME LEET ADDRESS Y-ST-ZIP LE	☐ Change ☐ Addition	
TITLE NAME		· .	4. 2 NA 4.3 STF 4.4 CIT 5.1 TIT 5.2 NA	ME LEET ADORESS (-ST-ZIP LE	☐ Change ☐ Addition	
TITLE NAME STREET AODRESS		· .	4. 2 NA 4.3 STF 4.4 CIT 5.1 TIT 5.2 NA 5.3 STF	ME LEET ADDRESS Y-ST-ZIP LE AE LEET ADDRESS	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		\ \ \ DELETE	4. 2 NA 4.3 STF 4.4 CIT 5.1 TIT 5.2 NA 5.3 STF 5.4 CIT	ME LEET ADDRESS Y-ST-ZIP LE AE REET ADDRESS Y-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET AODRESS CITY-ST-ZIP TITLE		· .	4. 2 NA 4.3 STF 4.4 CIT 5.1 TITE 5.2 NA 5.3 STF 5.4 CIT 6.1 TITE	ME LEET ADDRESS (*-ST-ZIP LE AE LEET ADDRESS (*-ST-ZIP LE LEET ADDRESS (*-ST-ZIP LE	☐ Change ☐ Addition	
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14. 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 annual report or supplemental annual 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GATHE AND TYPED OF PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

4 23 99 7761050