

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 760583

**Entity Name:** WPBT COMMUNICATIONS FOUNDATION, INC.

**FILED**  
**Feb 04, 2014**  
**Secretary of State**  
**CC0920714723**

**Current Principal Place of Business:**

C/O DOLORES SUKHDEO  
14901 NE 20TH AVENUE  
MIAMI, FL 33181-1121

**Current Mailing Address:**

C/O DOLORES SUKHDEO  
P.O. BOX 610002  
MIAMI, FL 33261-0002 US

**FEI Number: 59-2141826**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SUKHDEO, DOLORES  
14901 NE 20TH AVE.  
MIAMI, FL 33181-1121 US

*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:** DOLORES SUKHDEO

02/04/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name ELMORE, GEORGE  
Address 2101 S CONGRESS AVENUE  
City-State-Zip: DELRAY BEACH FL 33445

Title PRESIDENT, CEO  
Name SUKHDEO, DOLORES  
Address 14901 NE 20TH AVE  
City-State-Zip: MIAMI FL 33181

Title DIRECTOR  
Name RODRIGUEZ, RAMON  
Address 14901 NE 20TH AVENUE  
City-State-Zip: MIAMI FL 33181

Title DIRECTOR  
Name LOWELL, JACK  
Address 2855 LEJEUNE RD  
City-State-Zip: CORAL GABLES FL 33134

Title T  
Name CARROLL, SHIRLEY C  
Address 14901 NE 20TH AVE  
City-State-Zip: MIAMI FL 33181

Title S  
Name SOCIAS, PEGGY  
Address 14901 NE 20TH AVE  
City-State-Zip: MIAMI FL 33181

Title DIRECTOR  
Name WEAVER, GEORGE  
Address 5300 NORTH FEDERAL HIGHWAY  
City-State-Zip: FT. LAUDERDALE FL 33308

Title DIRECTOR  
Name HANTMAN, SUSAN  
Address 11900 BISCAYNE BOULEVARD  
SUITE 501  
City-State-Zip: NORTH MIAMI FL 33181

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*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SHIRLEY C. CARROLL

TREASURER

02/04/2014

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           CHAIRMAN, DIRECTOR  
Name           SILVERS, LAURIE  
Address        2255 GLADES ROAD  
                  SUITE 221A  
City-State-Zip: BOCA RATON FL 33431