

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 707192

1. Entity Name

AMERICAN LUNG ASSOCIATION OF SOUTH FLORIDA, INC.

**FILED**  
**Jan 28, 2000 8:00 am**  
**Secretary of State**

01-28-2000 90211 025 \*\*\*\*61.25

Principal Place of Business

Mailing Address

2020 SOUTH ANDREWS AVE.  
 FT. LAUDERDALE FL 33316

2020 SOUTH ANDREWS AVE.  
 FT. LAUDERDALE FL 33316-3430

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-075 1907

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JUST, DAVID R  
 2020 S ANDREWS AVE  
 FT LAUDERDALE FL 33316

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: TD  Delete  
 NAME: STONE, JOYCE E  
 STREET ADDRESS: 2500 NE 48TH LANE #203  
 CITY-ST-ZIP: FORT LAUDERDALE FL 33308

TITLE:  Change  Addition  
 NAME:  Change  Addition  
 STREET ADDRESS:  Change  Addition  
 CITY-ST-ZIP:  Change  Addition

TITLE: VPD  Delete  
 NAME: DORR, RICHARD  
 STREET ADDRESS: 949 S. NORTH LAKE DRIVE  
 CITY-ST-ZIP: HOLLYWOOD FL 33019

TITLE:  Change  Addition  
 NAME:  Change  Addition  
 STREET ADDRESS:  Change  Addition  
 CITY-ST-ZIP:  Change  Addition

TITLE: PD  Delete  
 NAME: SCOTT, STEVEN  
 STREET ADDRESS: 5230 N. FEDERAL HWY  
 CITY-ST-ZIP: LIGHT HOUSE POINT FL 33064

TITLE:  Change  Addition  
 NAME:  Change  Addition  
 STREET ADDRESS:  Change  Addition  
 CITY-ST-ZIP:  Change  Addition

TITLE: SD  Delete  
 NAME: BRAUSS, JAMES R  
 STREET ADDRESS: 1528 NE 4TH AVENUE  
 CITY-ST-ZIP: FT. LAUDERDALE FL 33304

TITLE:  Change  Addition  
 NAME:  Change  Addition  
 STREET ADDRESS:  Change  Addition  
 CITY-ST-ZIP:  Change  Addition

TITLE:  Delete  
 NAME:  Delete  
 STREET ADDRESS:  Delete  
 CITY-ST-ZIP:  Delete

TITLE:  Change  Addition  
 NAME:  Change  Addition  
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TITLE:  Delete  
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 CITY-ST-ZIP:  Delete

TITLE:  Change  Addition  
 NAME:  Change  Addition  
 STREET ADDRESS:  Change  Addition  
 CITY-ST-ZIP:  Change  Addition

12. 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

*Richard Dorr*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/00 (954) 524 4657  
 Date Daytime Phone #

CR2E037 (9/99)