

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90135 005 ****61.25

DOCUMENT # 715566

1. Entity Name

THE FLORIDA ASSOCIATION OF RADIOLOGIC SCIENCE PR

Principal Place of Business

Mailing Address

PO BOX 934176
MARGATE FL 33063-4176
US

PO BOX 934176
MARGATE FL 33093-4176
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-6209750**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LAMBUS, ANTHONY J
704 SW 74TH AVE
NORTH LAUDERDALE FL 33068

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
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
HARRISON, MARILYN
1121 S.W. 39TH AVE
FT. LAUDERDALE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DROTAR, KATHLEEN
1084 KANT ST
ENGLEWOOD FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HARRISON, LORENZO
1121 SW 39TH AVE
FT LAUDERDALE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LAMBUS, ANTHONY
704 SW 74TH AVE
N. LAUDERDALE FL 33068 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ROACH, MARJORIE
704 SW 74TH AVE.
N. LAUDERDALE FL 33068 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
ANTHONY J. LAMBUS
704 SW 74TH AVE
NORTH LAUDERDALE, FL ☒ Change ☐

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT ELECT
GINGER GRIFFIN
4811 AVERY CIRCLE
JACKSONVILLE, FL 32210 ☐ Change ☐

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SECRETARY
HARRISON, MARILYN
1121 SW 39TH AVE
FT LAUDERDALE FL ☒ Change ☐

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COMM. COORD.
HARRISON, LORENZO
1121 SW 39TH AVE
FT. LAUDERDALE, FL. ☐ Change ☐

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/00

(954) 720-6661

Date

Daytime Phone #