

UNIFORM BUSINESS REPORT (UBR)

MENT # 719927

MAINLANDS OF TAMARAC, NINTH SECTION, INC.

Principal Place of Business: NW 58TH ST, TAMARAC, FL 33321
 Mailing Address: 7112 NW 58TH STREET, TAMARAC FL 33321-5731, US

Principal Place of Business: [Blank]
 Suite, Apt. #, etc.: [Blank]
 City & State: [Blank]

Country: [Blank]
 Zip: [Blank]
 Country: [Blank]

FILED
 01 JUL 18 AM 11:50
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-1447291
 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 DELETED, JEFF
 15 NW 57TH CT
 TAMARAC FL 33321
delete

7. Name and Address of New Registered Agent
 Name: Tracy S. Schnaitman
 Street Address: 2531 Wagon Blvd
 City: Sunrise, FL
 Zip Code: 33222

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: Tracy S. Schnaitman, mgr. DATE: 4/15/01

FILE NOW: FEE IS \$61.25
 9. Election Campaign Financing: \$5.00 May Be Added to Fees
 Make Check Payable to Department of State

| OFFICERS AND DIRECTORS | |
|--|--|
| P T. DALE HARRY 7103 NW 57TH DRIVE TAMARAC FL 33321 | <input checked="" type="checkbox"/> Delete |
| VD KATZ, HARRY 7405 NW 58TH COURT TAMARAC FL 33321 | <input checked="" type="checkbox"/> Delete |
| SD SEXTON, ROSE 7408 NW 58TH ST TAMARAC FL | <input checked="" type="checkbox"/> Delete |
| TD FELDMAN, BERTHA 7112 NW 58TH CT TAMARAC FL | <input checked="" type="checkbox"/> Delete |
| 400004533844 -08/14/01-01048-008 *****61-25 *****61-25 | <input type="checkbox"/> Delete |
| ET ADDRESS -ST-ZIP | <input type="checkbox"/> Delete |

| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|---|--|
| P JALBERT, MERCADO P D 7112 NW 57 COURT TAMARAC, FL 33321 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| YON, FRANK 7302 NW 57CT TAMARAC FL 33321 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| FVP Robert Monti 7102 NW 57 Court TAMARAC, FL 33321 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| S Genevieve (Knieper) Knieper 7104 NW 58 COURT TAMARAC, FL 33321 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition resigned |
| SVP Emile Snyden 5719 NW 70 Avenue TAMARAC, FL 33321 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| SID Snyden, Carol 5720 NW 73 ave TAMARAC FL 33321 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TID Bernard, Anne 5805 NW 72 Ave TAMARAC FL 33321 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| VP, D Torlucci Wendy 5709 NW 70 Jct TAMARAC FL 33321 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |

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]* FRANK YON 4/18/01 (954) 722-4293
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)

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