

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 24, 2003 8:00 am**  
**Secretary of State**

01-24-2003 90049 046 \*\*\*\*70.00

|                                                      |                                                                                   |
|------------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # 729648</b>                             |  |
| <b>1. Entity Name</b><br><b>VICTORY VILLAS, INC.</b> |                                                                                   |

|                                                                                                                    |                                                                                                        |
|--------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|
| <b>Principal Place of Business</b><br><b>851 W DANIA BCH BLVD</b><br><b>P.O. BOX 1025</b><br><b>DANIA FL 33004</b> | <b>Mailing Address</b><br><b>851 W DANIA BCH BLVD</b><br><b>P.O. BOX 1025</b><br><b>DANIA FL 33004</b> |
|--------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|

|                                       |                           |
|---------------------------------------|---------------------------|
| <b>2. Principal Place of Business</b> | <b>3. Mailing Address</b> |
|---------------------------------------|---------------------------|

|                     |                     |
|---------------------|---------------------|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
|---------------------|---------------------|

|              |              |
|--------------|--------------|
| City & State | City & State |
|--------------|--------------|

|     |         |     |         |
|-----|---------|-----|---------|
| Zip | Country | Zip | Country |
|-----|---------|-----|---------|



☐ CHECK HERE IF MAKING CHANGES

|                                 |  |                |
|---------------------------------|--|----------------|
| <b>4. FEI Number 59-1551568</b> |  | Applied For    |
|                                 |  | Not Applicable |

|                                                                                                                   |  |
|-------------------------------------------------------------------------------------------------------------------|--|
| <b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |  |
|-------------------------------------------------------------------------------------------------------------------|--|

|                                                                                   |                                                                                                                                                                    |
|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>6. Name and Address of Current Registered Agent</b>                            | <b>7. Name and Address of New Registered Agent</b>                                                                                                                 |
| <b>DES JARDIN, DENNIS</b><br><b>851 W DANIS BCH BLVD</b><br><b>DANIA FL 33004</b> | Name <u>DES SARDIN DENNIS</u><br>Street Address (P.O. Box Number is Not Acceptable)<br><u>851 WEST DANIA BEACH BLVD</u><br>City <u>DANIA BEACH</u> FL <u>33004</u> |

**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. I am familiar with, and accept the obligations of registered agent.**

SIGNATURE [Signature] 1/24/03  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

|                                 |                                                                                                                               |                                                          |
|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| <b>FILE NOW: FEE IS \$61.25</b> | <b>9. Election Campaign Financing</b><br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> | <b>Make Check Payable to Florida Department of State</b> |
|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|

|                                                |                                                                                                                                      |                                                              |                                                                   |
|------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------------------|
| <b>10. OFFICERS AND DIRECTORS</b>              |                                                                                                                                      | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b> |                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>P</b><br><b>SCHWARTZ, RONALD</b><br><b>9701 N NEW RIVER CANAL</b><br><b>PLANTATION FL</b><br><input type="checkbox"/> Delete      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP               | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>S</b><br><b>GLANSBERG, MARK</b><br><b>4421 N. 41ST COURT</b><br><b>HOLLYWOOD FL 33021</b><br><input type="checkbox"/> Delete      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP               | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D</b><br><b>SCHWARTZ, GLORIA</b><br><b>9701 N NEW RIVER CANAL</b><br><b>PLANTATION FL</b><br><input type="checkbox"/> Delete      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP               | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D</b><br><b>GRAYSON, MARY LOU</b><br><b>1437 N.W. 105 AVENUE</b><br><b>PLANTATION FL 33324</b><br><input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP               | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>VP</b><br><b>BACHERS, PHILLIP</b><br><b>1315 LINCOLN</b><br><b>HOLLYWOOD FL</b><br><input type="checkbox"/> Delete                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP               | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>T</b><br><b>LADAU, GLEN</b><br><b>21301 POWERLINE RD</b><br><b>BOCA RATON FL</b><br><input type="checkbox"/> Delete               | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP               | <input type="checkbox"/> Change <input type="checkbox"/> 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 all other like empowered.**

SIGNATURE: [Signature] 1/21/03 954 921 8225

CR2E037 (10/02)

*Attachment*  
VICTORY LIVING PROGRAMS, Inc.

Board Member List

20017154  
# 729648

Term  
Expires 9/30

03 President

**Ronald Schwartz**  
9701 N. New River Canal Rd #109  
Plantation FL 33324 gloron65@aol.com

Hm: 954-472-4470  
Fax: 954-423-3580  
Cell 954- 829-4470

04 Vice  
President

**Philip Bachers**  
1317 Lincoln Street  
Hollywood FL 33020 philbachers@nuts.com

Hm: 954-922-1234  
Cell 954 410-6283  
Off. 954 468-3444

04 Treasurer

**Fred Mattes, CPA**  
3441 Water Oak Dr.  
Hollywood, FL 33021 smattes@compuseve.com

Hm: 954 987-9411  
Wk: 954-921-8225 x101

03 Secretary

**Mary Lou Grayson**  
2100 S. Ocean Lane #811  
Ft. Lauderdale, FL 33316 mlg8@bellsouth.net

Hm: 954-462-4195  
Cell 494-8124

04 Director

**Barbara Crooks**  
6025 Balboa Cir #303  
Boca Raton, FL 33433 tiggy2@msn.co

Hm 561 362 0692  
Cell 561 702 7370

03 Director

**Mark Glansberg**  
4421 North 41st Ct  
Hollywood FL 33021 jglansberg@aol.com

Hm: 954-989-0567  
Off 305.681.6647 X2253  
Cell 954-295-2365

04 Director

**Bill Grayson**  
2100 S. Ocean Lane #811  
Ft. Lauderdale, FL 33316 wdg6@bellsouth.net

Hm: 954-462-4195  
Cell 954-224-3733

03 Director

**Ronald E. Grossman**  
121 SE 6<sup>th</sup> Court  
Pompano Bch., FL 33060 reg1331@msn.com

Off. 954 760-7337  
Hm. 954 783-4366  
Cell 954 249-4139

04 Director

**Ruth Hirtz, RN**  
8218 NW 85 Ave  
Tamarac, FL 33321 ruth87@bellsouth.net

Hm 954 720 3503  
Pgr 954 777 8536

03 Director

**Stephen Schorr, Esq.**  
625 NE 3<sup>rd</sup> Ave.  
Ft. Lauderdale, FL 33304 schorrlaw@aol.com

Of: (954) 667-7800  
Hm: (954) 942-9570  
Cell: (954) 646-6406

04 Director

**Gloria Schwartz**  
9701 New River Canal Road  
Plantation FL 33324 gloron65@aol.com

Hm: 954-472-4470  
Fax: 954-423-3580

Director

**George Schulte**  
8 SE Terrace, Unit B  
Dania Beach, FL 33004 admiral1@stis.net

Hm: 954-921-9656  
Of: 954-924-1933

04 Director

**Sylvin Wolf, Ph.D, D.D.**  
7936 Exeter Circle W.  
Tamarac, Fl 33321 sylvandy01@earthlink.net

Hm: (954) 532-0057  
Fax: 954-677-089

Executive  
Director

**\*Dennis Des Jardin**  
1611 NE 4th Place  
Ft. Lauderdale, FL 33301

Hm: 954-463-8737  
Wk: 954-921-8225 X 102  
Pgr: 954-875-8451

Revised: 12/18/02

vlpl@netcom.com