

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 08, 2000 8:00 am
Secretary of State

08-08-2000 90089 011 ****61.25

DOCUMENT # 745773
 1. Entity Name
GLENWOOD CORT HOMEOWNERS' ASSOC., INC.

Principal Place of Business % DEVELOPMENT CONSULTANTS, INC 2901 SIMMS ST HOLLYWOOD FL 33020-1302	Mailing Address % DEVELOPMENT CONSULTANTS, INC 2901 SIMMS ST HOLLYWOOD FL 33020-1302
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DO NOT WRITE IN THIS SPACE

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 59-1960947	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
 DEVELOPMENT CONSULTANTS, INC
 2901 SIMMS ST
 HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State 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
After September 13, 2000 min. will be \$236.25

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TATE, KAYE 3900 SW 52 AVENUE , UNIT 805 PEMBROKE PINES FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MILLER, PRISCILLA 3900 SW 52ND AVE., #501 PEMBROKE PINES FL 33023	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRAZIER, LINDA 3900 SW 52 AVE, #201 PEMBROKE PINES FL 33023	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NORIEGA, MICHAEL 3900 SW 52ND AVE PEMBROKE PARK FL 33023	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SANDS, MEISHA 3900 SW 52 AVE, #403 PEMBROKE PINES FL 33023	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS 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)(l), 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 Date Daytime Phone #

CR2E037 (5/00)

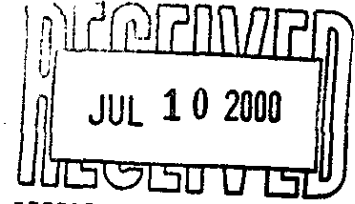


Attachment
DOC # 745773
A0071880

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 21, 2000

GLENWOOD CORT HOMEOWNERS' ASSOC., INC.
% DEVELOPMENT CONSULTANTS, INC
2901 SIMMS ST
HOLLYWOOD, FL 33020-1302



SUBJECT: GLENWOOD CORT HOMEOWNERS' ASSOC., INC.
Ref. Number: 745773

We have received your check(s) totaling \$61.25; however it cannot be processed and is being returned for the following:

There was not a completed annual report/uniform business report form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

Both the annual report/uniform business report and the filing fee must be received by our office together in order to be processed.

Please return the corrected documents to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/vh
ANNUAL REPORTS SECTION

Letter number: 300A00035205

Director's Office

Attachment DOC#: 745773

6/20/00

CORPORATE DETAIL RECORD SCREEN

8:42 AM

NUM: 745773

ST: FL ACTIVE/FL NON-PROF.

FLD: 01/31/1979

A0071880

LAST: REINSTATEMENT

FLD: 09/29/1988

FEI#: 59-1960947

NAME : GLENWOOD CORT HOMEOWNERS' ASSOC., INC.

CHANGED: 07/14/92

PRINCIPAL: % DEVELOPMENT CONSULTANTS, INC

ADDRESS 2901 SIMMS ST

HOLLYWOOD, FL 33020-1302

RA NAME : DEVELOPMENT CONSULTANTS, INC

NAME CHG: 09/29/88

RA ADDR : 2901 SIMMS ST

ADDR CHG: 06/24/96

HOLLOYWOOD, FL 33020 US

ANN REP : (1997) B 01/31/97 (1998) B 01/22/98 (1999) A 03/10/99

1. MENU, 3. OFFICERS, 4. EVENTS, 7. LIST, 8. NEXT, 9. PREV

ENTER SELECTION AND CR: