

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

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90177 044 ****61.25

DOCUMENT # N02000005927

1. Entity Name

SOUTH FLORIDA BLUES SOCIETY, INC.



Principal Place of Business

**POST OFFICE BOX 772548
CORAL SPRINGS FL 33077**

Mailing Address

**POST OFFICE BOX 772548
CORAL SPRINGS FL 33077**

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

82-0553004

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

**WEINBERG, ROBERT S
755 NW 80 TERRACE
MARGATE FL 33063**

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

SIGNATURE

[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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Delete
NAME	WEINBERG, ROBERT S	
STREET ADDRESS	755 NW 80 TERRACE	
CITY-ST-ZIP	MARGATE FL 33063	
TITLE	D	☐ Delete
NAME	WEINBERG, PRISCILLA	
STREET ADDRESS	755 NW 80 TERRACE	
CITY-ST-ZIP	MARGATE FL 33063	
TITLE	VD	☐ Delete
NAME	CAITO, HOPE D	
STREET ADDRESS	5112 NW 27 STREET	
CITY-ST-ZIP	MARGATE FL 33063	
TITLE	SD	☒ Delete
NAME	SOUTHERN, ELLEN	
STREET ADDRESS	744 NE 14 AVENUE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33304	
TITLE	TD	☒ Delete
NAME	PEREZ, JANET	
STREET ADDRESS	3912 NW 77 AVENUE	
CITY-ST-ZIP	DAVIE FL 33024	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SD	☒ Change ☒ Addition
NAME	SECRETARY	
STREET ADDRESS	DAWADA PATTERSON	
CITY-ST-ZIP	2620 NE 14TH ST. FT. LAUDERDALE, FL 33304	
TITLE	TD	☒ Change ☒ Addition
NAME	TREASURER	
STREET ADDRESS	DEONIS MURPHY	
CITY-ST-ZIP	5741 SW 15TH ST. PLANTATION, FL 33317	
TITLE	D	☐ Change ☒ Addition
NAME	DIRECTOR	
STREET ADDRESS	MARY COUNCIL	
CITY-ST-ZIP	625 HOLLY LANE PLANTATION, FL 33317	

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]

03/06/03

(954) 972-6877

CR2E037 (10/02)