

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90149 038 ****61.25

DOCUMENT # N04336

1. Entity Name

BROWARD COUNTY DARTING ASSOCIATION, INC.

Principal Place of Business

**5712 SETON DRIVE
MARGATE FL 33063**

Mailing Address

**P.O. BOX 4623
SUNRISE STATION
FT. LAUDERDALE FL 33338-4623**

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

NOT APPLICABLE

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

**SCONZO, ROBERT
4956 N. HEMMINGWAY CIR.
MARGATE FL 33063**

Name **DANE TEIXEIRA**

Street Address (P.O. Box Number is Not Acceptable)

937 SW 20th St.

City **FT LAUDERDALE**

FL

Zip Code **33315**

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.

DANE TEIXEIRA

PD

4/30/01

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	PD	☒ Delete
NAME	LYZAK, RUSSELL	
STREET ADDRESS	7091 COOLIDGE STREET	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	VPD	☒ Delete
NAME	SCONZO, ROBERT	
STREET ADDRESS	4956 N. HEMMINGWAY CIR.	
CITY-ST-ZIP	MARGATE FL	
TITLE	STSD	☐ Delete
NAME	LYONS, BOB	
STREET ADDRESS	5712 SETON DRIVE	
CITY-ST-ZIP	MARGATE FL	
TITLE	T	☒ Delete
NAME	INSKO, RUSSELL	
STREET ADDRESS	3505 W. ATLANTIC	
CITY-ST-ZIP	POMPANO FL	
TITLE	S	☒ Delete
NAME	ZAK, RICK	
STREET ADDRESS	649 W. OAKLAND, #108-A	
CITY-ST-ZIP	OAKLAND PARK FL	
TITLE	V	☒ Delete
NAME	GLASER, BRUCE	
STREET ADDRESS	4323 NW 65 TERR.	
CITY-ST-ZIP	CORAL SPRINGS FL 33067	

TITLE	PD	☐ Change ☒ Addition
NAME	DANE TEIXEIRA	
STREET ADDRESS	937 SW 20th ST.	
CITY-ST-ZIP	FT LAUDERDALE, FL 33315	
TITLE	V	☐ Change ☒ Addition
NAME	DOUG EVANS	
STREET ADDRESS	10715 NW 29th Manor, #6	
CITY-ST-ZIP	SUNRISE, FL 33322	
TITLE		☐ Change ☐ Addition
NAME	LORRAINE SYMON HAYES	
STREET ADDRESS	3914 NW 88th Terr	
CITY-ST-ZIP	CORAL SPRINGS, FL 33065	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☒ Addition
NAME	DONNA PAULACK	
STREET ADDRESS	771 S. Rainbow DR	
CITY-ST-ZIP	Hollywood, FL 33021	

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:

LORRAINE SYMON HAYES

4/30/01

954 8165775

CR2E037 (10/00)