2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2000 8:00 am
Secretary of State
05-05-2000 90097 032 ****61.25

DOCUMENT # N25401

1. Entity Name

AL-ANON INFORMATION SERVICE OF BROWARD CO., INC.

Principal Place of Business	Mailing Address
1915 NE 45TH STREET SUITE 205 FT LAUDERDALE FL 33308 US	1915 NE 45 ST SUITE 205 FT LAUDERDALE FL 33308-5100 US

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 NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HERMAN, DEBBY
1045 HILLSBORO MILE
#17A
HILLSBORO BEACH FL 33062

7. Name and Address of New Registered Agent

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.

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 Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~DC~~ ~~FORTUNE, HARRY~~ ~~2511 WOODSIDE DRIVE~~ ~~FT LAUDERDALE FL~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition DC COSTA, MIKE 2700 NW 99th Ave., Apt. 612A Coral Springs, FL 33065
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~DT~~ ~~SMETTERS, MELISSA~~ ~~8200 SW 12TH STREET~~ ~~N. LAUDERDALE FL~~ 33068	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition DT McCOMMON, MICHELLE 10520 Buttonwood Avenue Pembroke Pines, FL 33026
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~DS~~ ~~HERMAN, DEBBY~~ ~~1045 HILLSBORO MILE, #17A~~ ~~HILLSBORO BEACH FL~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition DC HERMAN, DEBBY 1045 HILLSBORO MILE, #17A Hillsboro Beach, FL 33062
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~DC~~ ~~GISMERVIK, MARY~~ ~~111 N. POMPANO BEACH BLVD., #1001~~ ~~POMPANO BEACH FL~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition D McDONALD, DEBBIE 12155 N.W. 31st St. Coral Springs, FL 33065
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~D~~ ~~MULVEY, ELAINE~~ ~~1537 E HILLSBORO BLVD #139~~ ~~DEERFIELD BEACH FL 33441~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition D TEABOUT, JUDY 1260 SE 3rd Court #5 Deerfield Beach, FL 33441
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~D~~ ~~MILONE, JAN~~ ~~7872 NW 34 PLACE~~ ~~HOLLYWOOD FL~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition BERG, JOEL 1640 W. Oakland Park Blvd. #304 Fort Lauderdale, FL 33064

CR2E037 (9/99)

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: Mike Costa ATL Chairperson District Alt April 24, 2000 954-345-9052
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #