

# 2000 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # N44217**

1. Entity Name

**BROWARD COUNTY COMMISSION GOVERNMENTAL LEASING C**

**FILED**  
**Apr 13, 2000 8:00 am**  
**Secretary of State**

04-13-2000 90032 040 \*\*\*\*61.25

Principal Place of Business 115 S ANDREWS AVE. GOVERNMENT CENTER, S-423 FT. LAUDERDALE FL 33301	Mailing Address 115 S ANDREWS AVE. GOV'T CTR. STE #513 FT. LAUDERDALE FL 33301-1818
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number <b>65-0276964</b>	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent

**LALLA, MATTHEW R.**  
**115 S ANDREWS AVE.**  
**GOVERNMENT CTR, STE 513**  
**FT. LAUDERDALE FL 33301**

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

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

TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>PARRISH, LORI NANCE</b>
STREET ADDRESS	<b>115 SOUTH ANDREWS AVE., ROOM 410</b>
CITY-ST-ZIP	<b>FT. LAUDERDALE FL 33301</b>
TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>ABRAMOWITZ, NORMAN</b>
STREET ADDRESS	<b>8212 NW 85TH AVE</b>
CITY-ST-ZIP	<b>TAMARAC FL 33-3321</b>
TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>COWAN, SCOTT I.</b>
STREET ADDRESS	<b>3101 HIDDEN HOLLOW LAND</b>
CITY-ST-ZIP	<b>DAVIE FL 33328</b>
TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>GUNZBURGER, SUZANNE N.</b>
STREET ADDRESS	<b>803 N. SOUTHLAKE DRIVE</b>
CITY-ST-ZIP	<b>HOLLYWOOD FL 33019</b>
TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>RODSTROM, JOHN E.</b>
STREET ADDRESS	<b>66 NURMI DRIVE</b>
CITY-ST-ZIP	<b>FT. LAUDERDALE FL 33301</b>
TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>JACOBS, KRISTIN</b>
STREET ADDRESS	<b>651 NE 5TH STREET</b>
CITY-ST-ZIP	<b>POMPANO BEACH FL 33060</b>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>C</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: *Suzanne N. Gunzburger* **SUZANNE N. GUNZBURGER** 4/11/00 <sup>(954)</sup> 357-7006  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)