FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jul 18, 2001 8:00 am **DOCUMENT # N47804 Secretary of State** 1. Entity Name 07-18-2001 90002 017 ****61.25 NORTH ANDREWS NEIGHBORHOOD ASSOCIATION INC. Principal Place of Business Mailing Address 169 NORTHWEST 44TH STREET 169 NORTHWEST 44TH STREET SUITE 6 FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0330925 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Filking CPA Street Address (P.O. Box Number is Not Acceptable) ZYLKA, VERONICA 4811 NE 5TH TERR. FORT LAUDERDALE FL 33334 â. 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. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 **\$5.00** May Be Trust Fund Contribution. Added to Fees Department of State After September 12, 2001, min. will be \$236.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. ☐ Addition ☐ Change ☐ Delete TITLE TITLE LAMPASONE, DON NAME NAME STREET ADDRESS STREET ADDRESS 4811 NE 5TH TERR. CITY-ST-ZIP FT. LAUDERDALE FL 33334 CITY-ST-ZIP Addition ☐ Change Delete TITLE TITLE Falk Marty Terrace HOROWITZ, MARK NAME NAME STREET ADDRESS STREET ADDRESS 71 NE 48TH CT. Fort Landerdale, PL 37374 FT. LAUDERDALE FL 33334 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE FILKINS, ERIC NAME NAME 231 NW 55ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33309 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE **DEFELICE, LINDA** NAME NAME 4509 NW 5TH AVE. STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP FT LAUDERDALE FL 33309 ☐ Change ☐ Addition TITLE ☐ Delete TITI F MCNAMARA, ROBERT NAME NAME STREET ADDRESS 460 NE 51ST ST. STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33334 CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE PAYNE, SHIRLEY NAME NAME 5416 NE 3RD AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP FT LAUDERDALE FL 33334 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

SIGNATURE:

Genature required

changed, or on an attachment with an address, with all other like empowered

Transver

7/10/01

(954) 958-9298