2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000004218

1. Entity Name

UNITED RESIDENT COUNCIL OF THE HOUSING AUTHORITY

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FILED
Jul 12, 2000 8:00 am
Secretary of State
07-12-2000 90013 038 ****61.25

Principal Place of Business	Mailing Address
1701 S.W. 2ND STREET #20 FT LAUDERDALE FL 33312 US	1701 S.W. 2ND STREET #20 FT LAUDERDALE FL 33312 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 65-0587943 ☐ 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
BROWN, MERCEDES 1701 S.W. 2ND STREET #20 FT. LAUDERDALE FL 33312	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
After September 13, 2000 min. will be $236.25

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	TD WILLIAMS, PAULINE 100 S.W. 18TH AVENUE, #417 FORT LAUDERDALE FL 33312	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BARBATA WYCHE 1436 NW 6 ST #19 FTL, FL 33311	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CARSON, SHIRLEY 1436 N.W. 6TH STREET, #4 FT. LAUDERDALE FL 33311	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BARBARA WILLIAMS 1701 SW 2 St #18 FTL FL 33312	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BROWN, MERCEDES 1701 S.W. 2ND #20 FT. LAUDERDALE FL 33312	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S PINKIE REED 817 NW 13 AVE #71 FTL FL 33311	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CFI2E037 (5/00)

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: Mercedes U Brown/MERCEDES BROWN 7-6-00 954-467-7818
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #