

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01, 1999 8:00 am
Secretary of State

05-01-1999 90099 034 ****61.25

DOCUMENT # N95000005911

1. Corporation Name

**SOUTHEAST DANIA COALITION OF CONCERNED CITIZENS,
INC.**

Principal Place of Business

1068 SE 6TH AVE.
DANIA FL 33004

Mailing Address

1068 SE 6TH AVE.
DANIA FL 33004



2. Principal Place of Business

21 1068 SE 6th Avenue

Suite, Apt. #, etc.

22

City & State

23 Dania Beach, FL

Zip

24 33004

Country

25 USA

2a. Mailing Address

26 1068 SE 6th Avenue

Suite, Apt. #, etc.

27

City & State

28 Dania Beach, FL

Zip

29 33004

Country

30 USA

3. Date Incorporated or Qualified

12/13/1995

4. FEI Number

65-0633667

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

WINSTON, ANDREW Y ESQ
500 SE 17TH STREET, STE 200
707 SE 3RD AVE, 5TH FLOOR
FT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE PSD ☒ DELETE

NAME ETLING, JOHN D
STREET ADDRESS 1068 S.E. 6TH AVENUE
CITY-ST-ZIP DANIA FL 33004

TITLE VD ☐ DELETE

NAME HERRMAN, JOHN
STREET ADDRESS 545 S.E. 12TH STREET, #405
CITY-ST-ZIP DANIA FL 33004

TITLE TD ☒ DELETE

NAME LEVY, RUBEN
STREET ADDRESS 1002 S.E. 5TH AVENUE
CITY-ST-ZIP DANIA FL 33004

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PSD ☒ Change ☐ Addition

1.2 NAME LEE L. LAVERY
1.3 STREET ADDRESS 1047 SE 6th AVENUE
1.4 CITY-ST-ZIP DANIA BEACH, FL 33004

2.1 TITLE VD ☒ Change ☐ Addition

2.2 NAME JOHN HERRMANN
2.3 STREET ADDRESS 545 SE 12th STREET, #405
2.4 CITY-ST-ZIP DANIA BEACH, FL 33004

3.1 TITLE TD ☒ Change ☐ Addition

3.2 NAME ALAN STOLMAN
3.3 STREET ADDRESS 1306 SE 5th COURT
3.4 CITY-ST-ZIP DANIA BEACH, FL 33004

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
LEE L. LAVERY

Date

Daytime Phone #

4-28-99 954-923-3072

CR2E037 (11/98)