2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 712350

FILED
Mar 02, 2000 8:00 am
Secretary of State
03-02-2000 90110 009 ****61.25

1. Entity Name

SOUTH LEISURE BY THE SEA ASSOCIATION, INC.

Principal Place of Business	Mailing Address
224 HIBISCUS AVE LAUDERDALE BY THE SEA FL 33308	224 HIBISCUS AVE LAUDERDALE BY THE SEA FL 33308-5491

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 59-1147906 ☐ 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
BECKER & POLIAKOFF P.A. 3111 STIRLING RD. FT. LAUDERDALE FL 33308	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	PD MCMANUS, JOSEPH 234 HIBISCUS AVE, #263 LAUD BY THE SEA FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ASD JANET FOLKMAN 224 HIBISCUS AVE APT 160 LAUD BY THE SEA FL 33308 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MURRAY, MABEL 234 HYBISCUS AVE LAUD BY THE SEA, FL00000	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~ASD~~ PD MURRAY, JOSEPH 234 HIBISCUS AVENUE, APT. 265 LAUD BY THE SEA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD RICCIUTI, LORRAINE 234 HIBISCUC AVENUE, APT. 172 LAUD BY THE SEA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP HENDRY, DUNCAN 234 HIBISCUS AVE, #370 LAUD BY THE SEA FL 33308	☐ 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

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: Mabel Murray Pres MABEL MURRAY 2-14-00 772-4762
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #