

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91707 044 ****61.25

DOCUMENT # 702873

1. Entity Name

UNITY OF HOLLYWOOD, INC.

Principal Place of Business

Mailing Address

**2750 VAN BUREN ST
 HOLLYWOOD FL 33020
 US**

**2750 VAN BUREN ST.
 HOLLYWOOD FL 33020**

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

59-6155040

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

**JUNG, BARBARA J.
 2915 MONROE STREET
 SUITE 7
 HOLLYWOOD FL 33020**

Name

Don WESLEY

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

2751 S. OCEAN DR. #503 S

City

HOLLYWOOD

FL

Zip Code

33019

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

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	P	☒ Delete
NAME	PODESTA, MARTHA	
STREET ADDRESS	2710 JACKSON ST.	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	T	☒ Delete
NAME	DUNLAP, ALAN	
STREET ADDRESS	9941 N ABIACA CIR	
CITY-ST-ZIP	DAVE FL	
TITLE	T	☒ Delete
NAME	POLAND, GEORGETTE	
STREET ADDRESS	5420 HAWKS BLUFF AVE	
CITY-ST-ZIP	DAVE FL	
TITLE	S	☒ Delete
NAME	PODESTA, MARTHA	
STREET ADDRESS	2710 JACKSON ST	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	T	☒ Delete
NAME	GRIGAS, DAVID	
STREET ADDRESS	3151 S. STATE RD 7, #114	
CITY-ST-ZIP	HOLLYWOOD FL 33023	
TITLE	VP	☒ Delete
NAME	BAILEY, RUBY	
STREET ADDRESS	3501 JACKSON ST 407	
CITY-ST-ZIP	HOLLYWOOD FL	

TITLE	P	☒ Change ☐ Addition
NAME	Don WESLEY	
STREET ADDRESS	2751 S. OCEAN DR. #503 S	
CITY-ST-ZIP	HOLLYWOOD, FL 33019	
TITLE	V	☒ Change ☐ Addition
NAME	SUZANNE BARNETT	
STREET ADDRESS	1201 S. OCEAN DR #411 S	
CITY-ST-ZIP	HOLLYWOOD, FL 33019	
TITLE	S	☒ Change ☐ Addition
NAME	PATTI SMITH	
STREET ADDRESS	2001 ATLANTIC SHORES BLVD #105	
CITY-ST-ZIP	HALLANDALE, FL 33009	
TITLE	T	☒ Change ☐ Addition
NAME	DAVID BANTA	
STREET ADDRESS	331 SW 113TH WAY	
CITY-ST-ZIP	PEMBROKE PINES, FL 33025	
TITLE	D	☒ Change ☐ Addition
NAME	SHIRLEY LAWYER	
STREET ADDRESS	7556 STIRLING RD #218	
CITY-ST-ZIP	HOLLYWOOD, FL 33024	
TITLE	D	☒ Change ☐ Addition
NAME	E. CONRAD SAWYER	
STREET ADDRESS	1413 N. 58TH AVE	
CITY-ST-ZIP	HOLLYWOOD, FL 33021	

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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/18/02

Daytime Phone #

CR2E037 (9/01)