

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 702913

1. Entity Name

GREATER MIAMI WOMEN'S BOWLING ASSOCIATION, INC.

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90084 049 ****61.25

0095750

Principal Place of Business

Mailing Address

7165 SW 47TH ST., BLDG. #316
MIAMI FL 33155

7165 SW 47TH ST., BLDG. #316
MIAMI FL 33155

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

59-1113680

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

JACOBS, SUE B
7165 SW 47TH ST.
BLDG. #316
MIAMI FL 33155

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

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 PT ☐ Delete
NAME RAUCH, MICKEY
STREET ADDRESS 10950 SW 105 AVE
CITY-ST-ZIP MIAMI FL 33147

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPT ☐ Delete
NAME BROOKS, VERMELL
STREET ADDRESS 2320 NW 81 ST
CITY-ST-ZIP MIAMI FL 33147

TITLE First Vice President ☒ Change ☐ Addition
NAME Shelley Goldstein
STREET ADDRESS 9420 SW 102 STREET
CITY-ST-ZIP Miami, FL 33176

TITLE VPT ☐ Delete
NAME BUZZARD, MARGO
STREET ADDRESS 10930 SW 47 TERR
CITY-ST-ZIP MIAMI FL 33165

TITLE Second Vice President ☒ Change ☐ Addition
NAME Ann Marie Fasbinder
STREET ADDRESS 9820 SW 130 STREET
CITY-ST-ZIP Miami, FL 33176

TITLE ST ☐ Delete
NAME JACOBS, SUE B
STREET ADDRESS 7165 SW 47 STREET #316
CITY-ST-ZIP MIAMI FL 33155

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SAA ☐ Delete
NAME FINLEY, IRENE
STREET ADDRESS 21030 N. MIAMI AVE
CITY-ST-ZIP NORTH MIAMI FL 33169

TITLE SGT-at-Arms ☒ Change ☐ Addition
NAME Patty Nevers
STREET ADDRESS 14498 SW 127 Court
CITY-ST-ZIP Miami, FL 33186

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: SUE B. JACOBS, Secretary/Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/19/02

Date

305-665-0788

Daytime Phone #

CR2E037 (9/01)