

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 716328

1. Entity Name

THE MARACAY ASSOCIATION, INC.

FILED
Feb 24, 2002 8:00 am
Secretary of State

02-24-2002 90051 011 ****61.25

Principal Place of Business

3301 NE 32ND AVE
FT LAUDERDALE FL 33308
US

Mailing Address

3301 NE 32ND AVE
FT LAUDERDALE FL 33308
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

4. FEI Number 59-1284429

Applied For
Not Applicable

Zip

Country

Zip

Country

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

BONNER, REGINA
3301 N.E. 32ND AVENUE
FT. LAUDERDALE FL 33308

Name OKULAR, REGINA M.

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

3301 NE 32nd Avenue

City FT. LAUDERDALE FL Zip Code 33308

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 Regina M. Okular REGINA M. OKULAR Feb. 6, 2002
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 PD
NAME BONNER, REGINA M ☐ Delete
STREET ADDRESS 3301 N.E. 32ND AVE.
CITY-ST-ZIP FORT LAUDERDALE FL 33308

TITLE PRESIDENT ☒ Change ☐ Addition
NAME OKULAR, REGINA M.
STREET ADDRESS 3301 NE 32 AVE.
CITY-ST-ZIP FORT LAUDERDALE FL 33308

TITLE TD
NAME MURPHY, MARK ☐ Delete
STREET ADDRESS 3301 NE 32ND AVE
CITY-ST-ZIP FT LAUDERDALE FL 33308

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

TITLE SD
NAME HASTINGS, FRANK ☐ Delete
STREET ADDRESS 3301 NE 32ND AVE
CITY-ST-ZIP FT. LAUDERDALE FL 33308

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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: REGINA M. OKULAR REGINA M. OKULAR Feb. 6, 2002 563-3223 (954)

CR2E037 (9/01)