2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 718616

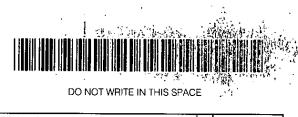
1. Entity Name

TRI-COUNTY CHAPTER OF THE NATIONAL BUSINESS LEAG

UE, INC. Principal Place of Business Mailing Address 771 NW 22 ROAD 771 NW 22 ROAD FT LAUDERDALE FL 33311 FT LAUDERDALE FL 33311

FILED Jun 02, 2002 8:00 am Secretary of State

06-02-2002 90907 039 ****61.25



Suite, Apt. #, etc.		3. Mailing Address Suite; Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
										City & Sta
Zip	Country	. Zip	Count	гу	5. Certificate of Status Desired \$			\$8.75 Add	8.75 Additional	
er ewilds	6. Name and Address of Current	Registered Agent			7. Name and A	ddress of New Re				
				Name						
Jackson, Luther D. 771 N.W. 22ND Road Ft. Lauderdale Fl				Street Address (P.O. Box Number is Not Acceptable)						
			٦,	City	17.7	"	FL	Zip Cod	le	
SIGNATURE	e named entity submits this statement for st				uired when reinstating)		DATE			
			ampaign Fina d Contribution		\$5.00 May Be Added to Fees Make Check Payable to Department of State					
10.	OFFICERS AND DIF	RECTORS	11.		ADDITIONS/CHAN	IGES TO OFFICERS	S AND DIF	ECTORS IN	10	
TITLE . NAME STREET ADDRESS CITY-ST-ZIP	TO MIZELL, IDA 841 S.W. AVENUE B BELLE GLADE FL	☐ Delete	TITLE NAME STREET / CITY-ST			- -		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY=ST=ZIP	VP NELSON, NORRIS 1225 PALM BCH LKS BLVD WEST PALM BEACH FL	☐ Delete	TITLE NAME STREET A	I	rend see to thought you you	· ··· C. C. Artin: Topico conjuin	مع چيو د د	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BUSH, EDITH 1444 - 8TH STREET WEST PALM BEACH FL	☐ Delete	TITLE NAME STREET A					☐ Change	Addition	
TITLE NAME Street Address City-St-Zip	PO MERRITT, VIRGINIA 2710 NW 24TH COURT FT. LAUDERDALE FL	☐ Delete	TITLE NAME STREET A CITY-ST			-		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHD Jackson, Luther D. 771 NW 22ND ROAD FT. Lauderdale Fl	☐ Delete	TITLE NAME STREET A CITY-ST-					☐ Change	Addition	
	VCD SCRUGGS, RICHMOND 600 S. FEDERAL HWY DEARFIELD BEACH FL	☐ Delete	TITLE NAME STREET A		`			☐ Change	Addition	

2. 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: