

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 719927

1. Entity Name

THE MAINLANDS OF TAMARAC, NINTH SECTION, INC.

Principal Place of Business

7112 NW 58TH ST  
TAMARAC FL 33321  
US

Mailing Address

7112 NW 58TH STREET  
TAMARAC FL 33321  
US

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

59-1447291

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

JOHNATMAN, TRACEY S  
2331 ARAGON BLVD.  
SUNRISE FL 33322

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 PD  
NAME YON, FRANK  
STREET ADDRESS 7302 N.W. 57 CT.  
CITY-ST-ZIP TAMARAC FL 33321 ☐ Delete

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

TITLE FVP  
NAME MONTI, ROBERT  
STREET ADDRESS 7102 NW 57 COURT  
CITY-ST-ZIP TAMARAC FL 33321 ☐ Delete

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

TITLE SD  
NAME SNYDEN, CAROL  
STREET ADDRESS 5720 NW 73 AVE.  
CITY-ST-ZIP TAMARAC FL 33321 ☐ Delete

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

TITLE TD  
NAME BERNARD, ANNE  
STREET ADDRESS 5805 N.W. 72 AVE.  
CITY-ST-ZIP TAMARAC FL 33321 ☐ Delete

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

TITLE VPD  
NAME TORLUCCI, WENDY  
STREET ADDRESS 5709 N.W. 70 TERR.  
CITY-ST-ZIP TAMARAC FL 33321 ☒ 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

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

FILED  
Feb 07, 2002 8:00 am  
Secretary of State

02-07-2002 90167 026 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)