

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 13, 2001 8:00 am**  
**Secretary of State**

07-13-2001 90006 035 \*\*\*\*61.25

**DOCUMENT # 724671**

1. Entity Name

**LAUDERDALE WEST COMMUNITY ASSOCIATION NO. 1, INC**

(LA)

Principal Place of Business

**1141 NW 85TH AVENUE  
 PLANTATION FL 33322**

Mailing Address

**1141 NW 85TH AVENUE  
 PLANTATION FL 33322**

**60073366**



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 **59-1655434**

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

**MOSHEN, MIRIAM  
 1121 N.W. 89TH WAY  
 PLANTATION FL 33322-5018**

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  
 After September 12, 2001, min. will be \$236.25**

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 NAME	VPD HALLE, PHIL	<input type="checkbox"/> Delete
STREET ADDRESS	8200 N.W. 13TH STREET	
CITY-ST-ZIP	PLANTATION FL 33322	
TITLE NAME	VPD MOSHEN, MIRIAM	<input type="checkbox"/> Delete
STREET ADDRESS	1121 NW 89TH AVENUE	
CITY-ST-ZIP	PLANTATION FL 33322	
TITLE NAME	T CHAIKIN, GERT	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	14 N.W. 85TH AVE.	
CITY-ST-ZIP	PLANTATION FL 33322	
TITLE NAME	PD GREENBERG, MARVIN	<input type="checkbox"/> Delete
STREET ADDRESS	1141 N.W. 85TH AVE.	
CITY-ST-ZIP	PLANTATION FL 33322	
TITLE NAME	VPD JANSEN, EDWARD C	<input type="checkbox"/> Delete
STREET ADDRESS	8591 N.W. 17TH PLACE	
CITY-ST-ZIP	PLANTATION FL 33322	
TITLE NAME	S STUART, BARBARA	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	1278 NW 82 AVENUE	
CITY-ST-ZIP	PLANTATION FL 33322	

TITLE NAME	PD JANSEN, EDWARD C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	8591 N.W. 17 PLACE	
CITY-ST-ZIP	PLANTATION, FL 33302	
TITLE NAME	VPD MARCUS, ARLINE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	1081 N.W. 88 AVE	
CITY-ST-ZIP	PLANTATION, FL 33302	
TITLE NAME	VPD LEVY, PAUL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	8004 NW 15 CT	
CITY-ST-ZIP	PLANTATION, FL 33302	
TITLE NAME	PD GREENBERG, MARVIN	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1141 N.W. 85 AVE	
CITY-ST-ZIP	PLANTATION, FL 33302	
TITLE NAME	SD CRISANO, LEONARD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	1080 NW 85 TERRACE	
CITY-ST-ZIP	PLANTATION, FL 33302	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:

*Arline Marcus*  
 ARLINE MARCUS

7/9/01

954-423-2506

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (5/01)