

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 725683

1. Entity Name

MARGATE FLORIDA LODGE, INC. NO. 2463

FILED
Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90238 042 ****61.25

Principal Place of Business

5451 NW 15TH ST
MARGATE FL 33063-3719

Mailing Address

5451 NW 15TH ST
MARGATE FL 33063-3719

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1556118

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

ALLOCCA, GEORGE JR.
11510 W. SAMPLE RD. STE. 1
P.O. BOX 8523
CORAL SPRINGS FL 33065

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
NAME
STREET ADDRESS
CITY - ST - ZIP
ER
ROSENTHAL, JIM
7805 NW 5TH CT
MARGATE FL 33063 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MAUR, ALAN R.
141 PONCE DE LEON ST
ROYAL PALM BEACH, FL 33411 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
ROGGE, EARL
817 TAMARAL LN
COCONUT CREEK FL 33063 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
LONGO, ROBERT
1801 MAPLEWOOD TR
COCONUT CREEK, FL 33063 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
TULCHIN, HOWARD
6432 VIA ROSA
BOCA RATON FL 33433 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
ROSENTHAL, JIM
7805 NW 5 CT
MARGATE, FL 33063 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TR
CAMPOLA, ANTHONY
5360 N.W. 29TH COURT
MARGATE FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TULCHIN, HOWARD
6432 VIA ROSA
BOCA RATON, FL 33433 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
COMO, VINCENT
6897 NW 1 CT.
MARGATE FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
PAPA, GENO
4181 CASVENTO CIR
COCONUT CREEK FL 33066 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MADSEN, JAMES
6342 NW 20 ST
MARGATE, FL 33063 ☒ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VINCENT P. COMO 971-9690
4/11/00
Daytime Phone #

CR2E037 (9/99)