## 2000 UNIFORM BUSINESS REPORT (UBR)

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SIGNATURE:

## FILED DOCUMENT # **726066** Jan 20, 2000 8:00 am 1. Entity Name Secretary of State FLORIDA COUNCIL OF INTERNATIONAL DEVELOPMENT. IN 01-20-2000 90237 029 \*\*\*\*61.25 Principal Place of Business Mailing Address P.O. BOX 140398 5600 NW 36TH STREET CORAL GABLES FL 33114-0398 6TH FLOOR **MIAMI FL 33166** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-1647799 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) MERK, J LAMAR 870 N.W. 87TH AVENUE NO 302 Zip Code City FI **MIAMI FL 33172** 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) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. BURTON A. LANDY ☐ Change Addition 🔽 Delete TITLE TITLE ONE S.E. 371. AVE., # 2800 HENDRY, ROBERT R. NAME NAME STREET ADDRESS 200 E ROBINSON STREET #500 STREET ADDRESS MIANI FL 33131-1704 CITY-ST-ZIP CITY-ST-ZIP ORLANDO-FL-GEORGE C.J. MOORE Change Addition Delete TITLE TITLE DINGLE, JERRY D. NAME 105 3. NARCISSUS AVE., #812 NAME STREET ADDRESS STREET ADDRESS 400 N. ASHLEY DR. #2000 > WEST PALM BEACH FL 33401 CITY-ST-ZIP CITY-ST-ZIP. TAMPA FL Addition <del>10 -</del> Delete TITLE TITLE ANDERSON, ROBERT L NAME NAME MCKAY, CHARLES-4202 EAST FOWLER AVENUE STREET ADDRESS STREET ADDRESS 5201 BLUE LAGOON DRIVE CUITE 500-CITY-ST-ZIP CITY-ST-ZIP MIAMI-FL ☐ Change ☐ Addition MD ☐ Delete TITI F TITLE NAME NAME MERK, J. LAMAR STREET ADDRESS STREET ADDRESS 870 NW 87TH AVE, NO 302 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Delete Change Addition TITLE TITLE NAME NAME <del>Frederick C. Brenner –</del> STREET ADDRESS STREET ADDRESS 12700 S.W: 69TH AVE: CITY-ST-ZIP CITY-ST-ZIP MIAMIL FE ☐ Change ☐ Addition ☐ Delete TITI F TITLE NAME BIERLEY, JOHN C. NAME STREET ADDRESS STREET ADDRESS 100 N TAMPA STREET, SUITE 2120 CITY-ST-ZIP 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 mustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

all other like empowered