

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 729305

1. Entity Name

TAMARAC PRESIDENTS COUNCIL, INC.

Principal Place of Business

5410 BANYAN LANE
TAMARAC FL 33319

Mailing Address

5410 BANYAN LANE
TAMARAC FL 33319

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

PLATZ, LEO
5410 BANYAN LANE
TAMARAC FL 33319

7. Name and Address of New Registered Agent

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

Leo Platz

Signature, typed or printed name of registered agent and title if applicable.

(NOT Registered Agent signature required when reinstating)

DATE

5/23/01

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

TITLE D ☐ Delete
NAME SOHN, LOU
STREET ADDRESS 7110 NW 74TH PLACE
CITY-ST-ZIP TAMARAC FL

TITLE P ☐ Delete
NAME COGHLAN, WALTER
STREET ADDRESS 4806 NW 49TH CT.
CITY-ST-ZIP TAMARAC FL

TITLE TD ☐ Delete
NAME PLATZ, LEO
STREET ADDRESS 5410 BANYAN LANE
CITY-ST-ZIP TAMARAC FL

TITLE SD ☐ Delete
NAME JULIA REULAND
STREET ADDRESS 4440 NW 26 TERRACE
CITY-ST-ZIP TAMARAC FL

TITLE P ☐ Delete
NAME MURPHY, DOROTHY
STREET ADDRESS 5008 NORTH WEST 50TH COURT
CITY-ST-ZIP TAMARAC FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

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

TITLE ☐ Change ☐ Addition
NAME
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:

Leo Platz

5/23/01

954-485-4975

FILED
May 29, 2001 8:00 am
Secretary of State

05-29-2001 90003 007 ****61.25

000434



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)