4/17

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State
04-17-2001 90126 032 ****61.25

DOCUMENT # 735142

1. Entity Name

SHADY BANKS CIVIC ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1700 S.W. 14 CT. FORT LAUDERDALE FL 33312	1700 S.W. 14 CT. FORT LAUDERDALE FL 33312

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0056916 — 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
KAMMERER, DANIEL 1820 SW 14TH CT. FORT LAUD FL 33312	Name: Kammerer, Daniel Street Address (P.O. Box Number is Not Acceptable): 1820 S.W 14 Ct City: Ft. Laud, FL Zip Code: 33312

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: DANIEL KAMMERER TREAS — DATE: 4.10.01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	PTD KAMMERER, GENENE 1820 SW 14TH CT FORT. LAUD FL 33312 ☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT D BRUCE TURRELL 1451 S.W 18 TERR. Ft. Laud, FL 33312 ☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CLANCY, DAVE 1466 SW 18 TERR FORT LAUDERDALE FL 33312 ☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT D Tim Hager 1736 SW 14st Ft. Laud, FL 33312 ☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PARISH, RUSS 1413 SW 19 AVE FORT LAUDERDALE FL 33312 ☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	SD D DENISE Richards 1505 S.W 14Ct Ft Laud, FL 33312 ☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	TREAS D DANIEL KAMMERER 1820 SW 14 Ct Ft. LAUD, FL 33312 ☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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

CR2E037 (10/00)

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 — DANIEL KAMMERER TREAS. — Date: 4.10.01 — Daytime Phone #: 954-523-7538

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR