

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 736958

1. Entity Name

LIGHTHOUSE POINT CHAPTER #2689 OF AMERICAN ASSOC

**FILED**  
**Jan 19, 2000 8:00 am**  
**Secretary of State**

01-19-2000 90188 006 \*\*\*\*70.00

Principal Place of Business

1801 NE 6 STR  
POMPANO BCH FL 33060  
US

Mailing Address

PO BOX 5862  
LIGHTHOUSE POINT FL 33074-5862  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

95-3053019

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

NADLER, FLORENCE  
1610 NW 49TH STREET  
POMPANO BEACH FL 33064

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 *Florence Nadler*

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

(NOTE: Registered Agent signature required when reinstating)

DATE *1/19/00*

**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 ☐ Delete  
NAME P  
STREET ADDRESS NADLER, FLORENCE  
CITY-ST-ZIP 1610 NE 49TH STREET  
POMPANO BEACH FL 33064

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

TITLE ☐ Delete  
NAME S  
STREET ADDRESS WHITE, CHESNIE  
CITY-ST-ZIP 260 S GOLF BLVD  
POMPANO BEACH FL

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

TITLE ☐ Delete  
NAME T  
STREET ADDRESS KOWAL, CAROLINE  
CITY-ST-ZIP 5349 NE 20TH AVE  
POMPANO BCH FL

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

TITLE ☐ Delete  
NAME D  
STREET ADDRESS ETRI, BEN  
CITY-ST-ZIP 1584 NE 30CT  
POMPANO BEACH FL 33064

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

TITLE ☒ Delete  
NAME D  
STREET ADDRESS BERNARDINI, MARGARET  
CITY-ST-ZIP 2760 BANYON RD, #33A  
BOCA RATON FL

TITLE ☒ Change ☒ Addition  
NAME Smith, OFelia  
STREET ADDRESS 2350 N.E 14th street apt 707  
CITY-ST-ZIP Pompano Beach, Florida 33062

TITLE ☒ Delete  
NAME D  
STREET ADDRESS ELKINS, PATRICIA  
CITY-ST-ZIP 920 DOVEPLUM CT  
HOLLYWOOD FL 33019

TITLE ☒ Change ☒ Addition  
NAME Tolsch, Violet  
STREET ADDRESS 121 N.E 30th street  
CITY-ST-ZIP Pompano Beach Florida 33064

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: *Florence Nadler*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE *1/19/00* 954-427-3154  
Daytime Phone #

CR2E037 (9/99)