

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 737027

1. Entity Name

BROWARD COUNTY RADIO CONTROL ASSOCIATION, INC.

Principal Place of Business

6245 FLAGLER ST.
HOLLYWOOD FL 33023

Mailing Address

6245 FLAGLER ST.
HOLLYWOOD FL 33023

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

59-2637132

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCROGGINS, JAMES
6245 FLAGLER ST.
HOLLYWOOD FL 33023

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

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
After September 12, 2001, min. will be \$236.25

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 FROMEN, VIC ☒ Delete
NAME
STREET ADDRESS 8201 N.W. 53 ST
CITY-ST-ZIP LAUDERHILL FL 33351

TITLE D KLINE, AL ☒ Delete
NAME
STREET ADDRESS 887 GARDENIA LANE
CITY-ST-ZIP PLANTATION FL 33317

TITLE T LOGAN, JOHN ☐ Delete
NAME
STREET ADDRESS 1951 BAY BERRY DR
CITY-ST-ZIP PEMBROKE PINES FL 33024

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P WEST, ED ☐ Change ☒ Addition
NAME
STREET ADDRESS 7909 NW 73RD TERRACE
CITY-ST-ZIP TAMARAC FL 33321

TITLE V P HANDLER, Lenny ☐ Change ☒ Addition
NAME
STREET ADDRESS 11900 NW 29TH MAJOR
CITY-ST-ZIP SUVRISE FL 33323

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

TITLE S WEST SHIRLEY ☐ Change ☒ Addition
NAME
STREET ADDRESS 7909 NW 73RD TERRACE
CITY-ST-ZIP TAMARAC FL 33321

TITLE D TRACY, RICHARD ☐ Change ☒ Addition
NAME
STREET ADDRESS 110 NW 190TH AVE
CITY-ST-ZIP PEMBROKE PINES FL 33029

TITLE D CIMMINO, JOEL ☐ Change ☒ Addition
NAME
STREET ADDRESS 8760 WOODSIDE COURT
CITY-ST-ZIP DAVIE FL 33328

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 OF JOHN LOGAN

6 Sept 2001

305 694 5340



DO NOT WRITE IN THIS SPACE

CR2E037 (5/01)