

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90111 008 ****61.25

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

7. Name and Address of New Registered Agent

**SCROGGINS, JAMES
6245 FLAGLER ST.
HOLLYWOOD FL 33023**

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. I am familiar with, and accept the obligations of registered agent.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete
NAME **FROMEN, VICTOR**
STREET ADDRESS **8201 NW 53RD STREET**
CITY-ST-ZIP **FORT LAUDERDALE FL 33351**

TITLE ☒ Change ☐ Addition
NAME **LAUDERHILL, FL**
STREET ADDRESS **33351**
CITY-ST-ZIP **V**

TITLE **D** ☐ Delete
NAME **HANDLER, LENNY**
STREET ADDRESS **11900 NW 29TH MANOR**
CITY-ST-ZIP **SUNRISE FL 33323**

TITLE ☒ Change ☐ Addition
NAME **LAUDERHILL, FL**
STREET ADDRESS **33351**
CITY-ST-ZIP **V**

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

TITLE ☐ Change ☐ Addition
NAME **LAUDERHILL, FL**
STREET ADDRESS **33351**
CITY-ST-ZIP **V**

TITLE **S** ☐ Delete
NAME **RILEY, GERALD**
STREET ADDRESS **5150 NW 1ST AVE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33309**

TITLE ☐ Change ☐ Addition
NAME **LAUDERHILL, FL**
STREET ADDRESS **33351**
CITY-ST-ZIP **V**

TITLE **D** ☒ Delete
NAME **TRACY, RICHARD**
STREET ADDRESS **110 NW 190TH AVENUE**
CITY-ST-ZIP **PEMBROKE PINES FL 33029**

TITLE **D** ☐ Change ☒ Addition
NAME **JOHN CASPANELLO**
STREET ADDRESS **5970 S.W. 99TH TERRACE**
CITY-ST-ZIP **COOPER CITY, FL 33328**

TITLE **V** ☐ Delete
NAME **CIMMINO, JOEL**
STREET ADDRESS **8960 WOODSIDE COURT**
CITY-ST-ZIP **DAVIE FL 33328**

TITLE **D** ☒ Change ☐ Addition
NAME **JOHN CASPANELLO**
STREET ADDRESS **5970 S.W. 99TH TERRACE**
CITY-ST-ZIP **COOPER CITY, 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: **JOHN CASPANELLO** **2/22/03 305694 5340**

CR2E037 (10/02)