

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

FILED
Feb 14, 2003 8:00 am
Secretary of State

02-14-2003 90186 038 ****61.25

DOCUMENT # 747073

1. Entity Name
**NOVA SOUTHEASTERN UNIVERSITY LAW ALUMNI ASSOCIAT
ION, INC.**



Principal Place of Business
**3305 COLLEGE AVENUE
FT. LAUDERDALE FL 33314**

Mailing Address
**3305 COLLEGE AVENUE
FT. LAUDERDALE FL 33314**

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 **NOT APPLICABLE**

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

**WELCH, ELIZABETH A
3305 COLLEGE AVENUE
FT. LAUDERDALE FL 33314**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
VESSEL, BEVERLY
100 W CYPRESS CREEK RD STE 930
FORT LAUDERDALE FL 33309** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
VESSEL, BEVERLY
100 W CYPRESS CREEK RD STE 930
FORT LAUDERDALE FL 33309** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
FINIZIO BASCOMBE, JAMIE
345 E CYPRESS CREEK RD., STE 930
FORT LAUDERDALE FL 33309** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
PORTH, ARI
201 SE 6TH STREET
FORT LAUDERDALE FL 33301** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
NIBLACK, KARI
230C OXMOOR WAY
AVON IN 46123** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**BATTISTA,
724
FORT LAUDERDALE FL 33316** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
BATTISTA, LOUIS
700 SE THIRD AVE., STE 100
FORT LAUDERDALE FL 33316** ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
GERSON, STEVE M
300 NW 82 AV STE 110
FORT LAUDERDALE FL 33322** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Gerson, Steve M.
150 N. University Drive, Ste 200
Plantation, FL 33324** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
TESCHER, HOWARD
100 NE 3 AVE STE 610
FORT LAUDERDALE FL 33301** ☐ Delete

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

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

4/4/03 954915-8888

CR2E037 (10/02)