

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 748504

1. Entity Name

SOUTHDAL CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

1100 NE 9TH AVE  
FT. LAUDERDALE FL 33304  
US

Mailing Address

4530 NE 10 AVENUE  
SUITE C  
OAKLAND PARK FL 33334-3946  
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

59-2055548

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

RUECKEL, KEITH  
4530 NE 10TH AVE.  
FT LAUDERDALE FL 33334

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

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 VPD  
NAME WHITE, K  
STREET ADDRESS 1100 NE 9TH AVE, 305  
CITY-ST-ZIP FORT LAUDERDALE FL 33304 ☐ Delete

TITLE SD  
NAME RUECKEL, KEITH  
STREET ADDRESS 4530 NE 10TH AVE.  
CITY-ST-ZIP FORT LAUDERDALE FL 33334 ☐ Delete

TITLE D  
NAME FUNK, B A  
STREET ADDRESS 1100 NE 9TH AVE, 303  
CITY-ST-ZIP FT. LAUDERDALE FL 33304 ☒ Delete

TITLE P  
NAME MCCLUNE, EMERY  
STREET ADDRESS 1100 NE 9TH AVE, 303  
CITY-ST-ZIP FT LAUD FL 33304 ☐ Delete

TITLE TD  
NAME MICK, MICHAEL  
STREET ADDRESS 1100 NE 9TH AVE, 102  
CITY-ST-ZIP FT LAUD FL 33304 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME WHITE, KATHY  
STREET ADDRESS 1100 NE 9 AVE #305  
CITY-ST-ZIP FT. LAUDERDALE, FL 33304 ☒ Change ☐ Addition

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

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

TITLE D  
NAME MCCLUNE, EMERY  
STREET ADDRESS 77 HENDRICKS ISLE  
CITY-ST-ZIP FT. LAUDERDALE, FL 33301 ☒ Change ☐ Addition

TITLE TD  
NAME MICK, MICHAEL  
STREET ADDRESS 601 NE 14 CT.  
CITY-ST-ZIP FT. LAUDERDALE, FL 33304 ☒ Change ☐ Addition

TITLE VD  
NAME KORNBERG, JOEL  
STREET ADDRESS 1950 S. OCEAN DRIVE, # 20-N  
CITY-ST-ZIP HALLENDALE, FL 33009 ☒ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/00

(954) 922-0987