

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 756335

1. Entity Name

SOUTH BROWARD BOARD OF REALTORS, INC.

Principal Place of Business

701 PROMENADE DR
PEMBROKE PINES FL 33026-3999

Mailing Address

701 PROMENADE DR
PEMBROKE PINES FL 33026-3999

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

59-0524665

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

BUNIN, KEVIN
701 PROMENADE DR
PEMBROKE PINES FL 33026

Name
WALTER LASSITER

Street Address (P.O. Box Number is Not Acceptable)
701 PROMENADE DRIVE

City
PEMBROKE PINES

FL

Zip Code
33026

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

Walter Lassiter - Accounting Administrator

1/16/2001

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP VALDEZ, WILLIAM J 9000 SHERIDAN ST STE 12 HOLLYWOOD BEACH FL 33024	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP CRONKHITE, DIANA 4220 SW 73 TERR FORT LAUDERDALE FL 33314	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT WIETOR, MICHAEL G 4801 S UNIVERSITY DR DAVIE FL 33328	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEVP BUNIN, KEVIN 701 PROMENADE DR PEMBROKE PINES FL 33026	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LETO, JOHN 4105 SW 4 ST PLANTATION FL 33317	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AGUDO, MARTI COUNTRY SQUIRE, INC. 4801 S UNIVERSITY DR DAVIE FL 33328	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CRONKHITE, DIANA A CARUANA & ASSOC. 4220 S W 73 TERRACE FT LAUDERDALE, FL 33314	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP LETO, JOHN 4105 S W 4 STREET PLANTATION, FL 33317	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEVP LORI J. ROMANO 701 PROMENADE DRIVE PEMBROKE PINES, FL 33026	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FARREY, L. THOMAS 417 E SHERIDAN STREET PMB 242 DANIA BEACH, FL 33004	☐ 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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-16-01 954431-5300



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)