# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Apr 02, 2001 8:00 am**
**Secretary of State**
04-02-2001 90276 025 ****61.25

0053286

DOCUMENT # 763430

1. Entity Name

DEERFIELD BEACH CHAPTER #3465 OF AMERICAN ASSOCI

| Principal Place of Business | Mailing Address |
|---|---|
| 1427 E. HILLSBORO BLVD<br>APT. 629<br>DEERFIELD BEACH FL 33441-4214 | P.O. BOX 495<br>DEERFIELD BEACH FL 33443 |

763430

DO NOT WRITE IN THIS SPACE

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc.: 1686 SW 19th Avenue | Suite, Apt. #, etc. |
| City & State: Deerfield Beach, Fl. | City & State |
| Zip: 33442 / Country | Zip / Country |

4. FEI Number: 95-3731598 ☐ 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 |
|---|---|
| POWERS, MICHAEL<br>170 SE 7TH ST<br>#1<br>DEERFIELD BEACH FL 33441 | Name: BRADLEY, SHIRLEY W.<br>Street Address (P.O. Box Number is Not Acceptable): 1686 SW 19th Avenue<br>City: Deerfield Beach, Fl. FL Zip Code: 33442 |

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: SHIRLEY W. BRADLEY — Shirley W Bradley — March 7, 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 | PD<br>POWERS, MICHAEL<br>170 SE 7TH ST #1<br>DEERFIELD BCH FL 33441 | ☐ Delete | PD<br>BRADLEY, SHIRLEY W.<br>1686 SW 19th Ave.<br>DEERFIELD BEACH, FL. 33442 | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VD<br>PERK, SHIRLEY<br>1537 E HILLSBORO BL APT 130D<br>DEERFIELD BEACH FL 33441 | ☐ Delete | VD<br>BOLKEN, MICHELLE<br>2181 NE 67th St.,Apt.604<br>Ft.Lauderdale, FL. 33318 | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>AHRENS, BETTY E<br>1539 SE 7TH CT<br>DEERFIELD BCH FL | ☐ Delete | SD<br>DOWNING, PRISCILLA<br>6750 NE 21st Rd.,#129<br>Ft.Lauderdale,Fl. 33308-1135 | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TD<br>MCALISTER, MILDRED<br>400 NE 20TH ST D216<br>BOCA RATON FL | ☐ Delete | SAME | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | CD<br>NIXON, CARL<br>214 SW 1ST TERRACE<br>DEERFIELD BEACH FL 33441-3598 | ☐ Delete | CD<br>HARRIS, ROLAND<br>339 NW 43rd St.<br>Pompano Beach, Fl. 33064-2544 | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | CD<br>POWERS, MARLENE<br>170 SE 7TH ST, #1<br>DEERFIELD FL 33441 | ☐ Delete | SAME | ☐ Change ☐ Addition |

CR2E037 (10/00)

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: MILDRED MCALISTER — SIGNATURE REQUIRED — Mildred McAlister — Mar. 7, 2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #