

2000 UNIFORM BUSINESS REPORT (UBR)

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FILED
Jul 13, 2000 8:00 am
Secretary of State

06-08-2000 90031 004 ****61.25

DOCUMENT # 764656			
1. Entity Name Plantation Newcomers Club Inc R			
Principal Place of Business Box 16543 Plantation FL 33318-4744		Mailing Address Same	
2. Principal Place of Business Same		3. Mailing Address Same	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Same		City & State Same	
Zip Same	Country	Zip Same	Country
6. Name and Address of Current Registered Agent Harriet R. Alexander 1931 SW 81 Way Davie FL 33324			
7. Name and Address of New Registered Agent Name: Dorothy M. Pozehl Street Address (P.O. Box Number is Not Acceptable): 382 SW 58 Ave Plantation FL 33317 City: FL Zip Code:			

DO NOT WRITE IN THIS SPACE

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 Harriet R. Alexander ^{President} 5/9/00
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. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS ^(old)		11. ^(New) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1st VP marcia David D 661 SW 54 Ave Plantation FL 33317 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1st VP D Sally Flur 11092 NW 8th St Plantation FL 33324 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2nd VP Michelle Dunn D 360 NW 107 Ave Plantation FL 33324 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2nd VP D Leslie McKee 1061 NW 93 Ave Plantation FL 33322 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3rd VP Dorothy Pozehl D 382 SW 58 Ave Plantation FL 33317 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3rd VP D Marie Brindger 11951 NW 24th St Plantation FL 33323 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C.S.D.U. Sally Flur D 11092 NW 8th St Plantation FL 33324 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	C.S.D.U. Jolly Gewart D 745 NW 98 Circle SW 71 Plantation FL 33324 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RSDS Todd Hecht D 401 NW 95 Ave Plantation FL 33324 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	RSDS D Marilyn Potter 201 E Plantation Circle Plantation FL 33324 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres Harriet R Alexander D 1931 SW 81 Way Davie FL 33324 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres. D Dorothy Pozehl 382 SW 58 Ave Plantation FL 33317 <input type="checkbox"/> Change <input type="checkbox"/> 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: Harriet R. Alexander ^{SECRETARY} 5/9/00 954-475-1794
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (9/99)