

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M24313

1. Entity Name

BANKATLANTIC VENTURE PARTNERS 1, INC.

**FILED**  
**May 22, 2000 8:00 am**  
**Secretary of State**

05-22-2000 90040 027 \*\*\*150.00

Principal Place of Business

Mailing Address

~~% JOHN E. ABDO~~  
 1750 E SUNRISE BLVD  
 FT. LAUDERDALE FL 33304

% JOHN E. ABDO  
 1750 E SUNRISE BLVD  
 FT. LAUDERDALE FL 33304-3013

2. Principal Place of Business

3. Mailing Address

P.O. Box 5403

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
 Fort Lauderdale, FL

4. FEI Number 59-2697180

Applied For  
 Not Applicable

Zip

Country

Zip

Country

33310-5403

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

FURMAN, JACK A ESQ  
 1750 E SUNRISE BLVD  
 FT. LAUDERDALE FL 33304

Name GILBERT, GLEN R

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

1750 EAST SUNRISE BLVD

City

FT LAUDERDALE

FL

Zip Code 33304

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.

GLEN R. GILBERT

SIGNATURE

Executive Vice President

4/24/2000

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☐ Delete  
 NAME ABDO, JOHN E.  
 STREET ADDRESS 1750 E SUNRISE BLVD  
 CITY-ST-ZIP FT. LAUDERDALE FL

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

TITLE S ☒ Delete  
 NAME LEVAN, JARETT S  
 STREET ADDRESS 1750 E SUNRISE BLVD.  
 CITY-ST-ZIP FT. LAUDERDALE FL

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

TITLE VTD ☐ Delete  
 NAME GILBERT, GLEN  
 STREET ADDRESS 1750 E. SUNRISE BOULEVARD  
 CITY-ST-ZIP FT. LAUDERDALE FL

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

TITLE CD ☐ Delete  
 NAME LEVAN, ALAN B  
 STREET ADDRESS 1750 E. SUNRISE BOULEVARD  
 CITY-ST-ZIP FT. LAUDERDALE FL

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

TITLE DV ☐ Delete  
 NAME ABDO, FRANK J  
 STREET ADDRESS 1750 E. SUNRISE BOULEVARD  
 CITY-ST-ZIP FT. LAUDERDALE FL

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE

GLEN R. GILBERT  
 Executive Vice President

4/25/2000

(954) 760-5200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)