

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2003 8:00 am
Secretary of State

03-20-2003 90123 028 ****61.25

DOCUMENT # N00000001525

1. Entity Name

EVERGLADES COLLEGE, INC.



Principal Place of Business

**1500 NW 49TH ST
FORT LAUDERDALE FL 33309**

Mailing Address

**1500 NW 49TH ST
FORT LAUDERDALE FL 33309**

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 **65-0216638**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KEISER, ARTHUR
1500 NW 49TH ST
FT LAUDERDALE FL 33309**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST KEISER, ARTHUR DR. 1500 NW 49TH ST FORT LAUDERDALE FL 33309	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CT WALDMAN, JAMES 2751 WEST ATLANTIC BLVD POMPANO BEACH FL 33069	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KONDRACJI, MARIA 5900 N ANDREWS AVE, STE 250 FORT LAUDERDALE FL 33309	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCKENZIE, CATHERINE 6451 N FEDERAL HWY, STE 1113 FORT LAUDERDALE FL 33308	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCKENZIE, LIPTON 3520 W BROWARD BLVD, STE 217 FORT LAUDERDALE FL 33312	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PACE, JOSEPH 1230 SOUTH SOUTHLAKE DRIVE HOLLYWOOD FL 33020	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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] SIGNATURE REQUIRED

CR2E037 (10/02)