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

DOCUMENT # N0000006378

1. Entity Name

SOUTHWOOD COMMUNITY COUNCIL, INC.



FILED Mar 31, 2003 8:00 am Secretary of State

03-31-2003 90135 042 ****61.25

SOUTHIN	TOOD COMMINIONITY COUNCIL,								
215 SOUTH MONROE STREET 790 SUITE 702 SUI		Mailing Address 7900 GLADES ROAD SUITE 200 BOCA RATON FL 33434) (#11)(## 11) (*1	88/41 88/41 88/41 88/41 88/41 88/41 8	111 80 (211 : 11	1 78 (:6 ((:1 16(
2. Principal	Place of Business	3. Mailing Address							
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.			HECK HERE IF MAKING C	HANGES	;		
City & State		City & State		4. FEI Number 59-3709222			Applied For Not Applicable		
Zip	Country	Zip	Country	5. Certificate of State		3.75 Ad	ditional	1	
	6. Name and Address of Current Re	egistered Agent		7. Name and Addre	ss of New Registered Age	•		┪	
		Name							
BARIC, JOHN 7900 GLADES ROAD			Street Addre	Street Address (P.O. Box Number is Not Acceptable)				1	
SUITE 2				= -				7	
BOCA RATON FL 33433			City		FL	Zip Coc	le	1	
8 The above	e named entity submits this statement for t	he nursess of changing its r	agistared office or regi	stored agent or both in th		::::		4	
the obliga	ations of registered agent.	to parpose of onal ging to the	ogiatarea emae er regi	stored agent, or beat, in the	o otato orriorida. Familani	mar with,	апо ассері		
SIGNATURE	Signature, typed or printed name of registered agent and	title if applicable. (NOTE:	Registered Agent signature req	uired when reinstating)	DATE				
FILE NOW: FEE IS \$61.25			9. Election Campaign Financing Trust Fund Contribution.		Make Check Payable to Florida Department of State				
10.	OFFICERS AND DIRE	CTORS	1 1.	ADDITIONS (CHANCES	TO OFFICERS AND DIREC	TODC II	1.10	4	
TITLE	PD STREETS AND BINE	☐ Delete	TITLE	ADDITIONS/CHANGES		Change	Addition	่ฐ	
NAME STREET ADDRESS CITY-ST-ZIP	EDMOND, TIMOTHY D 215 S MONROE STREET SUITE 70 TALLAHASSEE FL 32301		NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Mondiffs	E037 (10/02)	
TITLE NAME	VD DANTIN. J. KEITH 215 S MONROE STREET SUITE 70	☐ Delete	TITLE NAME] Change	Addition	CR2	
STREET ADDRESS CITY-ST-ZIP	TALLAHASSEE FL 32301	2	STREET ADDRESS CITY-ST-ZIP					1	
TITLE	STD	☐ Delete	TITLE			Change	Addition	 -	
NAME	TEAL, DAVID		NAME		_	ronungo			
STREET ADDRESS	5010 SOUTHWOOD PLANTATION I	RD CIR	STREET ADDRESS						
CITY-ST-ZIP	TALLAHASSEE FL 32311		CITY-ST-ZIP						
TITLE		☐ Delete	TITLE) Change	Addition		
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CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					{	
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TITLE		☐ Delete	TITLE			Change	Addition	1	
	I .								
NAME STREET ADDRESS			NAME STREET ADDRESS				_		

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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

SIGNATURE PEQUIRED

2/4/03 850

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