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

FILED
Jun 03, 2002 8:00 am
Secretary of State
06-03-2002 91201 007 ****70.00

DOCUMENT # N01000004592

1. Entity Name
Plantation Swim Team at North Broward Booster Club, Inc.

DO NOT WRITE IN THIS SPACE

BU124243

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2. Principal Place of Business	3. Mailing Address
North Broward Prep School	c/o Alissa Marre
Suite, Apt. #, etc.: 7600 Lyons Rd	Suite, Apt. #, etc.: 22112 Acapulco Ct.
City & State: Coconut Creek, FL	City & State: Boca Raton, FL
Zip: 33073 Country:	Zip: 33428 Country:

4. FEI Number: 65-1109225 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: Alissa Marre

Street Address (P.O. Box Number is Not Acceptable): 22112 Acapulco Ct.

City: Boca Raton **FL** Zip Code: 33428

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25
Initial or Amended UBR

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

TITLE	P/D
NAME	Victoria Erdo
STREET ADDRESS	20983 Raindance Ln
CITY-ST-ZIP	Boca Raton FL 33428
TITLE	VP
NAME	Len Polin
STREET ADDRESS	7600 Lyons Rd
CITY-ST-ZIP	Coconut Creek, FL 33073
TITLE	T/D
NAME	Alissa Marre
STREET ADDRESS	22112 Acapulco Ct.
CITY-ST-ZIP	Boca Raton FL 33428
TITLE	S/D
NAME	Elyse Carrion
STREET ADDRESS	3470 NW 47th Ave
CITY-ST-ZIP	Coconut Creek, FL 33063
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NAME	
STREET ADDRESS	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Victoria Erdo 5/28/02 561 487-6850
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #