

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

FILED
May 29, 2003 8:00 am
Secretary of State

04-14-2003 90224 002 ****61.25

DOCUMENT # N02000007623

1. Entity Name

SVOSH-NOVA SOUTHEASTERN UNIVERSITY, INC.



Principal Place of Business

8060 LAKEPOINTE CT
PLANTATION FL 33322

Mailing Address

8060 LAKEPOINTE CT
PLANTATION FL 33322

55044545



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

1701 White Hall Dr

3. Mailing Address

1701 White Hall Dr

Suite, Apt. #, etc.

#403

Suite, Apt. #, etc.

#403

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

4. FEI Number

74-306550

Applied For

Not Applicable

Zip

33324

Country

U.S.A.

Zip

33324

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KOCKETT, TODD
8060 LAKEPOINTE CT
PLANTATION FL 33322

7. Name and Address of New Registered Agent

Name Juan Canizales

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

1701 White Hall Drive #403

City Ft. Lauderdale

FL

Zip Code 33324

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

Juan R. Canizales

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

Juan R. Canizales

NOTE: Registered agent signature required when reinstating.

04/04/03

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	Secretary	☒ Delete
NAME	Benjamin D. Ingram	
STREET ADDRESS	9610 Alcazar Lane	
CITY-ST-ZIP	Davis, FL 33324	
TITLE	TREASURER	☒ Delete
NAME	NEIL HOOK	
STREET ADDRESS	118 ROYAL PARK DR. N.W.	
CITY-ST-ZIP	Ft. Lauderdale, FL 33309	
TITLE	Vice President	☒ Delete
NAME	Juan R. Canizales	
STREET ADDRESS	1701 White Hall Drive #403	
CITY-ST-ZIP	Ft. Lauderdale, FL 33324	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<u>President</u>	☐ Change ☒ Addition
NAME	<u>Juan R. Canizales</u>	
STREET ADDRESS	<u>1701 White Hall Drive #403</u>	
CITY-ST-ZIP	<u>Ft. Lauderdale, FL 33324</u>	
TITLE	<u>Vice President</u>	☐ Change ☒ Addition
NAME	<u>Kate Brauss</u>	
STREET ADDRESS	<u>5100 W. Rolling Hills Circle #306</u>	
CITY-ST-ZIP	<u>Davis, FL 33327</u>	
TITLE	<u>Secretary</u>	☐ Change ☒ Addition
NAME	<u>Jennifer Smith</u>	
STREET ADDRESS	<u>8001 Lakepointe Court</u>	
CITY-ST-ZIP	<u>Plantation, FL 33322</u>	
TITLE	<u>Treasurer</u>	☐ Change ☒ Addition
NAME	<u>Andrew Jensen</u>	
STREET ADDRESS	<u>10401 W. Broward Blvd #102</u>	
CITY-ST-ZIP	<u>Plantation, FL 33324</u>	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Juan R. Canizales

Juan Canizales 4/10/03 954-423-1420

Date

Daytime Phone #

CR2E037 (10/02)