

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 31, 2001 8:00 am
Secretary of State

07-18-2001 90005 025 ****70.00

DOCUMENT # N07784

1. Entity Name

RICHMOND HEIGHTS HOMEOWNERS ASSOCIATION INC.

Principal Place of Business

Mailing Address

13900 HARRISON ST.
P.O. BOX 571083
MIAMI FL 33176

13900 HARRISON ST.
P.O. BOX 571083
MIAMI FL 33176

77090



DO NOT WRITE IN THIS SPACE

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 **59-2502219**

Applied For
Not Applicable

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

MARSHALL, JAMES
13900 HARRISON STREET
MIAMI FL 33176

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.

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete
NAME **MARSHALL, JAMES L**
STREET ADDRESS **13900 HARRISON STREET**
CITY-ST-ZIP **MIAMI FL**

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

TITLE **V** ☐ Delete
NAME **RICHARDSON, JR. P**
STREET ADDRESS **14122 SW 110 AVE**
CITY-ST-ZIP **MIAMI FL**

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

TITLE **SD** ☐ Delete
NAME **CRUZ, MARGARET L.**
STREET ADDRESS **14541 MONROE ST**
CITY-ST-ZIP **MIAMI FL**

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

TITLE **TD** ☐ Delete
NAME **MOORE, FRANCES**
STREET ADDRESS **10711 SW 152ND ST**
CITY-ST-ZIP **MIAMI FL 33176**

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

TITLE **D** ☐ Delete
NAME **BEMBRY, WILLIE**
STREET ADDRESS **11512 SW 136 TERRACE**
CITY-ST-ZIP **MIAMI FL**

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

TITLE **D** ☐ Delete
NAME **RICHARDSON, PEARLY**
STREET ADDRESS **14641 SW 106 AVE.**
CITY-ST-ZIP **MIAMI FL**

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

[Signature]

7/10/2001 305-232-3458

CR2E037 (10/00)

Attachment
Doc # N07784
7790



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

July 19, 2001

correction
made

RICHMOND HEIGHTS HOMEOWNERS ASSOCIATION INC.
13900 HARRISON ST.
MIAMI, FL 33176

Subject: RICHMOND HEIGHTS HOMEOWNERS ASSOCIATION INC.

Reference Number: N07784

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$70.00; however, the report has not been filed and a copy is being returned for the following correction(s):

Florida law does not allow an entity to serve as its own registered agent. Designate a registered agent, other than the entity, with a street address in Florida. The agent must sign if this is a change from the registered agent previously filed with this office.

Florida nonprofit corporations are required to have at least 3 directors or trustees. Please place the letter "D" or "T" beside the names and business addresses of each director or trustee.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/sg

ANNUAL REPORTS SECTION

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314