2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State
04-26-2001 90121 034 ****61.25

DOCUMENT # N09962

N/C filed 1/22/01 KM

1. Entity Name

~~BROWARD COUNTY ASSOCIATION OF LIFE UNDERWRITERS,~~
Broward Association of Insurance and Finan

Principal Place of Business	Mailing Address
9000 NW 28 DR., #309 CORAL SPRINGS FL 33065 US	P.O. BOX 491208 FORT LAUDERDALE FL 33349-1208 US

C0053217

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 59-2440528 ☐ 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
THOMSON, PATRICIA R. 9000 NW 28TH DR #309 CORAL SPRINGS FL 33065	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D BLALOCK, JOHN 899 WEST CYPRESS CREEK ROAD, #902 FORT LAUDERDALE FL 33309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V CHALOM, JOSEPH 9825 W SAMPLE RD #206 CORAL SPRINGS FL 33065	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ESTLER, BRIAN 600 CORPORATE DR #200 FORT LAUDERDALE FL 33334	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Mee, Christopher 11390 Woodchuck Lane Boca Raton, FL 33428	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PIERRE, ARNOLD 4760 N STATE RD 7 FORT LAUDERDALE FL 33319	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V LANGER, IRA 5900 NORTH ANDREWS AVENUE #200 FORT LAUDERDALE FL 33309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BILSKER, ROBERT 9825 W SAMPLE RD #206 CORAL SPRINGS FL 33065	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V	☒ Change ☐ Addition

CR2E037 (10/00)

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: Joseph Chalom SIGNATURE REQUIRED Joseph Chalom 4-18-01 (954) 340-1588
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment Doc# N09963
G00538917

Broward Association of Insurance and Financial Advisors

Directors

D
Kolowich, Andrew
5900 N. Andrews Avenue, #200
Ft. Lauderdale, FL 33309

D
Turney, Edward
7880 Canterbury Lane
Plantation, FL 33324

D
Wardell, Phillip
1749 NE 26th Street, #F
Ft. Lauderdale, FL 33305