

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

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90276 037 ****61.25

DOCUMENT # N09962

1. Entity Name

BROWARD ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS, INC.



Principal Place of Business

9000 NW 28 DR., #309
CORAL SPRINGS FL 33065
US

Mailing Address

P.O. BOX 491208
FORT LAUDERDALE FL 33349-1208
US

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
BLALOCK, JOHN
899 WEST CYPRESS CREEK ROAD, #902
FORT LAUDERDALE FL 33309

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
1000 S. Pine Island Rd,
Plantation, FL 33324

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
RADA, KAAREN
3300 N. UNIVERSITY DR. #250
CORAL SPRINGS FL 33067

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☒ Addition
V
Lee Gorodetsky
1001 W Cypress Creek Rd.
Ft. Lauderdale, FL 33309

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MEE, CHRISTOPHER
158464 72 DRIVE NORTH
PALM BEACH GARDENS FL 33418

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☒ Addition
D
Dale Gorchoff
100 W Cypress Creek Rd.
Ft. Lauderdale, FL 33309

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
P
LANGER, IRA
5900 NORTH ANDREWS AVENUE #100
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
☐ Change ☐ Addition

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 another, like empowered.

SIGNATURE:

SIGNATURE REQUIRED *Ira Langer 4-21-03 954-771-3200*

CFR2037 (10/02)