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

## DOCUMENT # N10816

1. Entity Na	ER'S EDGE ASSOCIATION, IN	IC.				01-10-2003	90068 01′	7 ****(	61.25
Principal Place of Business 3000 NE 8TH TERRACE A-5 OAKLAND PARK FL 33334 US		Mailing Address 3000 NE 8TH TERRACE A-5 OAKLAND PARK FL 33334 US			<u> </u>	1811 AB181 (878) (1806 J	'11 <b>2 812</b> 21 82811 1	<b>1</b> 113 <b>1</b> 17 <b>0</b> 31 <b>1</b>	)( <b>0</b> 17 <b>217</b> 74 (201
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			<b>∀</b>	/ CHECK HERE IF	MAKING C	HANGES	5
City & State		City & State			4. FEI Number 59-2611643 Applied For				
Zíp Country		Zip	Country		5. Certificate of Status Desired See Required Fee Required				
	6. Name and Address of Current	Registered Agent			7. Name and Add	*· · ·			<u>ed</u>
			Name	9	7. Name and Add	icas of New Net	istered Age	int .	
HAYDEN, JAC 3000 NE 8TH TERRACE, B-4 OAKLAND PARK FL 33334			Stree	Address (P.O. Box Number is Not Acceptable)					
_	•		City			· .	FL	Zip Cod	de
8. The above the obligation	e named entity submits this statement for ations of registered agent.	r the purpose of changing	its registered office	or registered	d agent, or both, in	the State of Florid	la. I am fam	iliar with,	, and accept
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (N	NOTE: Registered Agent sign	nature required w	hen reinstating)		DATE		<del></del>
			Campaign Financing d Contribution.	, man	\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State				
10.	OFFICERS AND DIR	ECTORS	11.	ΑC	DITIONS/CHANGE	S TO OFFICERS	AND DIREC	TORS IN	V 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SHIELDS, LAURA 3000 NE 8TH TERRACE, #B-1 OAKLAND PARK FL 33334	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FORT LAUDERDALE FL 33309	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ro 200 Ft	SE Hep 7 N.E. Laudendo	WONTH, 174 Ave le, FL	333 333	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD OVELIETTE, LOUISE 3000 NE 8TH TERRACE, #A-5 OAKLAND PARK FL 33304	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD EDDY, ANDREW 1527 S.E. 8TH TERR. DEERFIELD BEACH FL 33441	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		1	-		Change	☐ Addition
TITLE NAME		☐ Delete	TITLE					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

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

564-7769

**FILED** 

Jan 10, 2003 8:00 am Secretary of State