

4/2/01

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-02-2001 90360 001 ****61.25

DOCUMENT # N12544

1. Entity Name

PARENTS FOR DEBATERS, NORTH MIAMI BEACH SENIOR H

Principal Place of Business

% HOWARD W GORDON
 2035 NE 201 TERRACE
 NORTH MIAMI BEACH FL 33179

Mailing Address

% HOWARD W GORDON
 2035 NE 201 TERRACE
 NORTH MIAMI BEACH FL 33179

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

59-2604514

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

GORDON, HOWARD W
 2035 NE 201 TERRACE
 NORTH MIAMI BEACH FL 33179

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	VD GORDON, HOWARD W 2035 NE 201 TERRACE NORTH MIAMI BCH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD KONIG, MARCOS % HOWARD GORDON, 2035 NE 201 TERR N MIAMI BEACH FL 33179	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D- ULERY, MERLE 1543 NE 109 ST MIAMI FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LUCK, JAY 21300 BE 23 AVE N MIAMI BEACH FL 33180	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	/	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DDiane Campbell 19512 B05 O-Link Dr. Country Club of Miami, FL 33015	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sue Lohi - PD 2350 NE 1st St. N Miami Beach FL 33180	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Lynn Garfinkle TD 20625 NE 22nd Pl. N. Miami Beach, FL 33180	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Frederic Garfinkle SD 20625 NE 22nd Pl. N Miami Beach, FL 33180	☐ 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 all other like empowered.

SIGNATURE:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)