2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # **N17101** Feb 28, 2000 8:00 am **Secretary of State** FLORIDA ROMANCE WRITERS, INC. 02-28-2000 90020 046 ****61.25 Mailing Address Principal Place of Business C/O MARILYN JORDON MARILYN JORDAN P O BOX 451205 4811 NW 10TH AVE FT LAUDERDALE FL 33309 SUNRISE FL 33424-3397 2. Principal Place of Business 3. Majling Address Stephenson Fern Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. O. Box 3397 Applied For City & State 4. FEI Number BOYNTON BCH 76-0237716 Not Applicable Country A/M BCh \$8.75 Additional Certificate of Status Desired m BC Fee Required 6. Name and Address of Current Registered Agent Street Address JORDAN, MARILYN 4811 NW 10TH AVE FT LAUDERDALE FL 33309 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 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Delete P/D Addition TITLE NAME JORDAN, MARILYN NAME 003 FERNWOOD D STREET ADDRESS STREET ADDRESS 4811 NW 10TH AVE BOYNTON BEACH, FL 39435 CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL DONNA R. CREEKNOE Change Delete TITI E TITLE VD. 734 SW 6th ST. NAME NAME MILLER, DIANE STREET ADDRESS STREET ADDRESS 12201 NW 27TH CT 21565 FL 33317 CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL 33323 Delete TITLE ☐ Addition T/D TITLE BUTLER JUDI 6448 COUNTRY FAIR CIR NAME **BUSTOS, ONA** NAME STREET ADDRESS STREET ADDRESS 11155 NW 26TH PL CITY-ST-7IP CITY-ST-7IP OYNTON SUNRISE FL De ete (Change ☐ Addition TITLE S/D JAN WASHBURN 4693 SW 19 STREET NAME SLOANE, JULIE STREET ADDRESS STREET ADDRESS 233-8TH ST CITY-ST-ZIP FT. LAUDERDAIE FL 33317 CITY-ST-ZIP WEST PALM BCH FL Delete ☐ Addition TITLE CYNTHIA THOMASON 12830 SW 10 COURT DAVIE, FL 33325 NAME NAME MANUEL, LISA STREET ADDRESS STREET ADDRESS 10231 NW 43RD ST CITY-ST-7IP CITY-ST-ZIP **CORAL SPRINGS FL** ☐ Delete Change TITLE 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 this tee 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 all other like empowered

NAME

STREET ADDRESS CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

US