

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 26, 2000 8:00 am
Secretary of State

05-26-2000 90106 023 ****61.25

DOCUMENT # N20792

1. Entity Name

MIAMI VOA ELDERLY HOUSING, INC.

Principal Place of Business

11495 W. FLAGLER STREET
 MIAMI FL 33174
 US

Mailing Address

3939 N. CAUSEWAY BLVD.
 METAIRIE LA 70002-1777
 US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

VOA National Services

Suite, Apt. #, etc.

1660 Duke St.

City & State

Alexandria, VA

Zip

22314-3427

Country

USA

4. FEI Number

58-1777367

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**C.T. CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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

TITLE **D** ☐ Delete
 NAME **NORMAN, JOHN H.**
 STREET ADDRESS **3100 DIVISION ST**
 CITY-ST-ZIP **METAIRIE LA**

TITLE **PD** ☒ Delete
 NAME **ROGERS JAMES**
 STREET ADDRESS **110 SOUTH UNION ST**
 CITY-ST-ZIP **ALEXANDRIA VA 22314**

TITLE **STVD** ☒ Delete
 NAME **CLARK, THOMAS J**
 STREET ADDRESS **110 S UNION ST 2ND FL**
 CITY-ST-ZIP **ALEXANDRIA VA 22314**

TITLE **D** ☐ Delete
 NAME **KELLEY, PATRICK C**
 STREET ADDRESS **2721 DIVISION ST**
 CITY-ST-ZIP **METAIRIE LA 70002**

TITLE **D** ☐ Delete
 NAME **FASTERLING, CHARLES W**
 STREET ADDRESS **2955 RIDGELAKE DR**
 CITY-ST-ZIP **METAIRIE LA 70002**

TITLE **D** ☐ Delete
 NAME **PERKINS, THOMAS P**
 STREET ADDRESS **1000 HOWARD AVE SUITE 100**
 CITY-ST-ZIP **NEW ORLEANS LA 70113**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP **70002**

TITLE **P/NVD** ☒ Change ☐ Addition
 NAME **Shahab Dadjou**
 STREET ADDRESS **1660 Duke St.**
 CITY-ST-ZIP **Alexandria, VA 22314-3427**

TITLE **ST/NVD** ☒ Change ☐ Addition
 NAME **Ron Patterson**
 STREET ADDRESS **530 Market Place Drive**
 CITY-ST-ZIP **Eden Prairie, MN 55344**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Shahab Dadjou, Pres.

703.341.5000

Date

Daytime Phone #

DOCUMENT #N20792
MIAMI VOA ELDERLY HOUSING, INC.

#N20792
A0066257

11. Additional Directors

D
Larry G. Schedler
909 Poydras St., Suite 3000
New Orleans, LA 70112

D
Keith Wetherspoon
816B Wilshire Blvd.
Metairie, LA 70005

D
Karl Zollinger
228 St. Charles ve
New Orleans, LA 70130