

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90064 029 *****61.25

0086880

DOCUMENT # N20792

1. Entity Name

MIAMI VOA ELDERLY HOUSING, INC.

Principal Place of Business

**11495 W. FLAGLER STREET
MIAMI FL 33174
US**

Mailing Address

**VOA NATIONAL SERVICES
1660 DUKE ST
ALEXANDRIA VA 22314-3427
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

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 NAME STREET ADDRESS CITY-ST-ZIP	D NORMAN, JOHN H. 3100 DIVISION ST METAIRIE LA	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PNVD DADJOU, SHAHAB 1660 DUKE ST ALEXANDRIA VA 22314-3427	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STNV PATTERSON, RON 7530 MARKET PLACE DR EDEN PRAIRIE MN 55344	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELLEY, PATRICK C 2721 DIVISION ST METAIRIE LA 70002	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FASTERLING, CHARLES W 2955 RIDGELAKE DR METAIRIE LA 70002	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PERKINS, THOMAS P 1000 HOWARD AVE SUITE 100 NEW ORLEANS LA 70113	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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	STNVD ☒ Change ☐ Addition
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	VPD ☒ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RON PATTERSON

Date

Daytime Phone #

3/22/01 504.834.3407

CR2E037 (10/00)

Miami VOA Elderly Housing, Inc.
Document #N20792

attachment
D# N20792
B0040447

10. Officers and Directors

Title	D
Name	Larry Schedler
Street Address	3900 No. Causeway Blvd.-Suite 1424
City-St-Zip	Metairie, LA 70002

Title	D
Name	Keith Weatherspoon
Street Address	113 Holland Ave
City-St-Zip	Albany, N.Y. 12208

Title	D
Name	Karl Zollinger
Street Address	228 St. Charles Ave
City-St-Zip	New Orleans, LA 70130