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

## Jan 16, 2003 8:00 am Secretary of State **DOCUMENT # N26957** 1. Entity Name 01-16-2003 90126 020 \*\*\*\*61.25 NATIONAL ASSOCIATION OF INDUSTRIAL AND OFFICE PA RKS-SOUTH FLORIDA CHAPTER, INC. Principal Place of Business Mailing Address 1500 NW 62ND STREET 1500 NW 62ND STREET 90003799 SUITE 106 SHITE 106 FORT LAUDERDALE FL 33309 FORT LAUDERDALE FL 33309 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. - Suite, Apt.-#; etc.: \*CHECK HERE IF MAKING CHANGES\* City & State City & State 4. FEI Number 59-2109509 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PARR. JOHN H. Street Address (P.O. Box Number is Not Acceptable) 1500 NW 62ND STREET SUITE 106 FORT LAUDERDALE FL 33309 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. I am familiar with, and accept the obligations of registered ag SIGNATURE ed agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE-1 ☐ Delete TITLE Change ☐ Addition PINCUS, GEORGE NAME NAME 2255 GLADES RD #340W STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33431** CITY-ST-7IP TITLE PPD ☐ Delete TITLE ☐ Addition NAME EAGON: DOUG NAME STREET ADDRESS 300 SE 2ND STREET STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33301 CITY-ST-ZIP TITLE ☐ Delete TITLE PED ☐ Addition SHERIDAN, PETER NAME NAME 2100 PARK CENTRAL BLVD #900 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33064 CITY-ST-ZIP CITY-ST-ZIP SD TITLE ☐ Delete TITLE ☐ Addition UTECHT, RHONDA NAME NAME 2701 GATEWAY DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL 33069 CITY-ST-7IP PED ☐ Delete TITLE ☐ Addition MILLER, HARLEY NAME STREET ADDRESS 614 S FEDERAL HIGHWAY STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33301 CITY-ST-ZIP ☐ Delete ED TITLE ☐ Change Addition PARR, JOHN H NAME NAME 1500 NW 62ND STREET #106 STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33309 CITY-ST-7IP CITY-ST-ZIP

I hereby certify that the information supplied with this filling 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 strue 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 frustee employered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if SIGNATURE:

FILED