

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 04, 2002 8:00 am
Secretary of State

08-04-2002 90163 016 ****61.25

DOCUMENT # N28859

1. Entity Name

PARKLAND F.O.P. LODGE 110, INC.

Principal Place of Business

Mailing Address

6600 N. UNIVERSITY DR.
 PARKLAND FL 33067

6600 N. UNIVERSITY DR.
 PARKLAND FL 33067

972184



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0236124

Applied For

Not Applicable

Zip

Country

Zip

Country

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

BROWN, GARY R
6600 N. UNIVERSITY DR.
PARKLAND FL 33067

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
min. will be \$236.25.

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 PD ☐ Delete
 NAME BROWN, GARY
 STREET ADDRESS 6600 N. UNIVERSITY DR.
 CITY-ST-ZIP PARKLAND FL 33067

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

TITLE VD ☐ Delete
 NAME SMITH, JEFFERY
 STREET ADDRESS 6600 N. UNIVERSITY DR.
 CITY-ST-ZIP PARKLAND FL 33067

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

TITLE TD ☒ Delete
 NAME SOLOWSKY, GREG
 STREET ADDRESS 6600 N. UNIVERSITY DR.
 CITY-ST-ZIP PARKLAND FL 33067

TITLE TD/SD ☒ Change ☐ Addition
 NAME LOPEZ, TERESA, C
 STREET ADDRESS 6600 UNIVERSITY DR.
 CITY-ST-ZIP PARKLAND, FL 33067

TITLE SD ☒ Delete
 NAME DEROSE, TAMMY
 STREET ADDRESS 6600 N. UNIVERSITY DR.
 CITY-ST-ZIP PARKLAND FL 33067

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 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:

GARY R. BROWN **GARY R. BROWN** 8/5/2002 (954) 753-5050

CR2E037 (4/02)