

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N40210

1. Entity Name

THE SERRA CLUB OF BROWARD COUNTY, INC.

**FILED**  
**Mar 04, 2000 8:00 am**  
**Secretary of State**

03-04-2000 90007 044 \*\*\*\*61.25

Principal Place of Business

Mailing Address

2731 N.E. 14TH STREET  
APT. 717  
POMPANO BEACH FL 33062-3550  
US

2731 N.E. 14TH STREET  
APT. 717  
POMPANO BEACH FL 33062-3550  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

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

DUBROSKY, LOUISE  
2731 N.E. 14TH STREET  
APT. 717 A  
POMPANO BEACH FL 33062-3550

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Delete
NAME	DUBROSKY, LOUISE	
STREET ADDRESS	2731 N.E. 14TH STREET, #717	
CITY - ST - ZIP	POMPANO BEACH FL	
TITLE	DV	<input type="checkbox"/> Delete
NAME	HENDERSON, WILLIAM E	
STREET ADDRESS	1211 N.E. 27TH TERRACE	
CITY - ST - ZIP	POMPANO BEACH FL	
TITLE	DV	<input type="checkbox"/> Delete
NAME	FRIEL, WILLIAM F III	
STREET ADDRESS	8201 S.W. 12TH STREET	
CITY - ST - ZIP	N. LAUDERDALE FL	
TITLE	DVM	<input type="checkbox"/> Delete
NAME	NOBBS, ROBERT	
STREET ADDRESS	2900 N.E. 14TH STREET, #108	
CITY - ST - ZIP	POMPANO BEACH FL	
TITLE	DVC	<input type="checkbox"/> Delete
NAME	LAHR, CAROL	
STREET ADDRESS	2880 N.E. 14TH STREET, #602	
CITY - ST - ZIP	POMPANO BEACH FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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: *Louise Dubrosky*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/00  
Date

(954) 943-7564  
Daytime Phone #

CR2E037 (9/99)