FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Jul 18, 2001 8:00 am **DOCUMENT # N43059** Secrétary of State 1. Entity Name 07-18-2001 90007 050 \*\*\*\*70.00 NATIONAL COALITION OF 100 BLACK WOMEN, INC. BROW Principal Place of Business Mailing Address 2315 NW 36TH TERRACE 2315 NW 36TH TERRACE LAUDERDALE LAKES FL 33311 LAUDERDALE LAKES FL 33311 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0394630 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) DALE, BETTIE J 2315 NW 36TH TERRACE LAUDERDALE LAKES FL 33311 Zip Code FL 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 hame 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 Make Check Payable to \$5.00 May Be Trust Fund Contribution. After September 12, 2001, min. will be \$236.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 (5/01)TITLE Delete TITLE ☐ Addition HORNE, EARLENE S NAME NAME 8939 NW 44TH COURT **CR2E037** STREET ADDRESS STREET ADDRESS CITY-ST-7IP SUNRISE FL 33351 CITY-ST-7IP ☐ Change Addition Delete TITLE TITLE BOWE, PAM NAME NAME STREET ADDRESS 3059 NO OAKLAND FOREST DR #202 STREET ADDRESS CITY-ST-ZIP OAKLAND PARK FL 33309 CITY-ST-ZIP TITLE Defete TITLE ☐ Change — < ☐ Addition –</p> SHAW, SARAH NAME NAME **4510 NW 12TH COURT** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL 33313 TITLE Delete TITLE Change Addition SMITH, BRENDA ALLEN NAME NAME 3000 NW 24TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition WEST, PATRICIA NAME NAME STREET ADDRESS 4510 NW 25TH ST STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP LAUDERHILL FL 33313 C Delete Change TITLE TITLE Addition DALE, BETTIE J NAME NAME STREET ADDRESS 2315 N.W. 36TH TERRACE STREET ADDRESS LAUDERDALE LAKES FL 33311 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 Statistes; 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: