2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address

FILED DOCUMENT # **N43353** Apr 24, 2000 8:00 am Secretary of State 1. Entity Name ST. GEORGE CIVIC ASSOCIATION, INC. 04-24-2000 90042 039 ****61.25 Principal Place of Business Mailing Address 3501 NW 8TH ST. 3840 NW 8 ST. FORT LAUDERDALE FL 33311 FORT LAUDERDALE FL 33311-6321 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State NOT APPLICABLE Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Ager SIMMONS, EDWARD 3840 NW 8 ST. FT. LAUDERDALE FL 33311 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 Fforida. SIGNATURE Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. TITLE PL ☐ Addition Delete TITLE NAME NAME SIMMONS, EDWARD STREET ADDRESS STREET ADDRESS 3840 NW 8 ST. CITY-ST-7IP CITY-ST-ZIP FT. LAUDERDALE FL 33311 ☐ Addition TITLE DS ☐ Delete TITLE LAMAR, LUCY NAME STREET ADDRESS STREET ADDRESS 3731 NW 9 ST CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 3331 TITLE TD ☐ Delete TITLE Change ■ Addition LEWIS, OZELL NAME STREET ADDRESS STREET ADDRESS 3731 NW 8TH PL CITY-ST-ZIP CITY-ST-ZIP <u>ft. Lauderdale fl</u> Delete ☐ Change Addition TITLE NAME WRIGHT, CLARANCE NAME STREET ADDRESS STREET ADDRESS **3751 NW 8 PLACE** CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33311 ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition ☐ Delete ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 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

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