

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 19, 2001 8:00 am
Secretary of State

04-19-2001 90089 015 *****61.25

0045080

DOCUMENT # N44217

1. Entity Name

BROWARD COUNTY COMMISSION GOVERNMENTAL LEASING C

Principal Place of Business

115 S ANDREWS AVE.
GOVERNMENT CENTER, S-423
FT. LAUDERDALE FL 33301

Mailing Address

115 S ANDREWS AVE.
GOV'T CTR, STE #513
FT. LAUDERDALE FL 33301

C0049487



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

65-0276964

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

**LALLA, MATTHEW R.
115 S ANDREWS AVE.
GOVERNMENT CTR, STE 513
FT. LAUDERDALE FL 33301**

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 NAME STREET ADDRESS CITY-ST-ZIP	D PARRISH, LORI NANCE 115 SOUTH ANDREWS AVE., ROOM 410 FT. LAUDERDALE FL 33301	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ABRAMOWITZ, NORMAN 8212 NW 85TH AVE TAMARAC FL 333321	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COWAN, SCOTT I. 3101 HIDDEN HOLLOW LAND DAVIE FL 33328	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUNZBURGER, SUZANNE N. 803 N. SOUTHLAKE DRIVE HOLLYWOOD FL 33019	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODSTROM, JOHN E. 66 NURMI DRIVE FT. LAUDERDALE FL 33301	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACOBS, KRISTIN 651 NE 5TH STREET POMPANO BEACH FL 33060	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRABER, BEN 3762 TERRAPIN LANE, #2204 CORAL SPRINGS, FL 33067 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCOTT, JAMES A. 3030 NE 40 STREET FORT LAUDERDALE, FL 33308 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C (CHANGE IN TITLE FROM 2000 REPORT) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

SIGNATURE REQUIRED JOHN E. RODSTROM
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/01
Date

(954) 357-7007
Daytime Phone #

CR2E037 (10/00)

Doc #
Attachment N44217
C0049487

BROWARD COUNTY COMMISSION GOVERNMENTAL LEASING CORPORATION

2001 UNIFORM BUSINESS REPORT
DOCUMENT # N44217
FEI # 65-0276964

ATTACHMENT FOR BLOCK 11 OF 2001 UNIFORM BUSINESS REPORT

7.1 Title: *D*
7.2 Name: *ILENE LIEBERMAN*
7.3 Address: *4809 WOODLANDS BLVD.*
7.4 City-St-Zip: *TAMARAC, FL 33319*

7.1 Title: *D*
7.2 Name: *EGGELLETON, JOSEPHUS, JR.*
7.3 Address: *3376 NW 21 STREET*
7.4 City-St-Zip: *LAUDERDALE LAKES, FL 33311*

7.1 Title: *D*
7.2 Name: *WASSERMAN-RUBIN, DIANA*
7.3 Address: *5731 SW 196 LANE*
7.4 City-St-Zip: *SOUTHWEST RANCHES, FL 33332*