

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N46053

1. Entity Name

SOUTHERN COUNTRY SOUTH FLORIDA, INC.

FILED
Aug 08, 2001 8:00 am
Secretary of State

08-08-2001 90141 014 ****61.25

0065563

Principal Place of Business
 PO BOX 23512
 FT LAUDERDALE FL 33307-3512
 US

Mailing Address
 P O BOX 23512
 FT LAUDERDALE FL 33307
 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

HEYMAN, REBECCA A
 715 SW 4TH ST 3
 FORT LAUDERDALE FL 33312

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

Rebecca Heyman

REBECCA HEYMAN

5.20.01

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

(NOTE: Registered Agent signature required when reissuing)

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	C HEYMAN, REBECCA A 715 SW 4TH ST 3 FORT LAUDERDALE FL 33312	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FOX, LEE 825 NW 13TH ST 210 BOCA RATON FL 33486	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD KENNEDY, JAMES 2200 SW 15TH CT FORT LAUDERDALE FL 33312	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAYMES, MITCHELL 1410 EUCLID AVE 7 MIAMI BEACH FL 33139	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCCALLEN, MIKE 777 SE 2ND AVE 107B DEERFIELD BEACH FL 33441	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HOLLAND, LENN 360 HORTON RD WEST PALM BEACH FL 33411	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C KNIGHT, JEANNE 360 HORTON AVE WEST PALM BEACH FL 33411	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHAWHAN, ED 7935 SW 162ND ST MIAMI FL 33157	<input type="checkbox"/> Change <input checked="" 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:

James Kennedy
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5.20.01

954.894.1784

Date

Daytime Phone #

CR2E037 (10/00)

Attachment
#N46053
A0080521

We corrected check
Sorry for the
inconvenience

Southern
Country
South
Florida



#N46053



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

July 19, 2001

SOUTHERN COUNTRY SOUTH FLORIDA, INC.
P O BOX 23512
FT LAUDERDALE, FL 33307 US

Subject: **SOUTHERN COUNTRY SOUTH FLORIDA, INC.**

Reference **N46053**
Number:

Please be advised, we have received your annual report/uniform business report; however, the report has not been filed and a copy is being returned for the following correction(s):

Please note the money amounts differ on the check. The numeric and written amounts must be the same. Please send a corrected check for the proper amount.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/FV
ANNUAL REPORTS SECTION

Attachment
DH N46053
A0080201