

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90535 014 ****61.25

DOCUMENT # N46053

1. Entity Name

SOUTHERN COUNTRY SOUTH FLORIDA, INC.



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



☐ CHECK HERE IF MAKING CHANGES

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

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

7. Name and Address of New Registered Agent

Name

LUCIO D. MARTINO

Street Address (P.O. Box Number is Not Acceptable)

816 NE 20TH DRIVE

City

FT LAUDERDALE

FL

Zip Code

33305

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **VD** ☒ Delete
NAME **HEYMAN, REBECCA A**
STREET ADDRESS **715 SW 4TH ST 3**
CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

TITLE **D** ☒ Delete
NAME **WILKERSON, ROGER**
STREET ADDRESS **821 NW 73RD TERRACE**
CITY-ST-ZIP **PLANTATION FL 33317**

TITLE **TD** ☒ Delete
NAME **ARGENORIGHT, JUDY**
STREET ADDRESS **4896 ALFRESCO**
CITY-ST-ZIP **BOCA RATON FL 33428**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition
NAME **RONA ADER**
STREET ADDRESS **4896 ALFRESCO ST**
CITY-ST-ZIP **BOCA RATON, FL 33428**

TITLE **D** ☐ Change ☒ Addition
NAME **JUDY ARGENORIGHT**
STREET ADDRESS **4896 ALFRESCO ST**
CITY-ST-ZIP **BOCA RATON, FL 33428**

TITLE **T/S/D** ☐ Change ☒ Addition
NAME **LUCIO DI MARTINO**
STREET ADDRESS **816 NE 20TH DRIVE**
CITY-ST-ZIP **FT. LAUDERDALE, FL 33305**

TITLE **C/D** ☐ Change ☒ Addition
NAME **MAURICE EDWARDS**
STREET ADDRESS **816 NE 20TH DRIVE**
CITY-ST-ZIP **FT. LAUDERDALE, FL 33305**

TITLE **D** ☐ Change ☒ Addition
NAME **GINA KUELLER**
STREET ADDRESS **7525 SW 8TH ST**
CITY-ST-ZIP **NORTH LAUDERDALE, FL 33068**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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] **LUCIO D. MARTINO**

4/23/03

(305)

662-5472

CR2E037 (10/02)