2000 UNIFORM BUSINESS REPORT (UBR)

6/

FILED
Jul 21, 2000 8:00 am
Secretary of State
06-05-2000 90048 047 ****61.25

DOCUMENT # N47609

1. Entity Name
South Florida Case Management Network (SFCMN)

Principal Place of Business
SFCMN
8362 Pines Blvd
#184
Pembroke Pines, FL 33024

Mailing Address
← SAME

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
SFCMN - 8362 Pines Bl

Suite, Apt. #, etc.
#184

City & State
Pembroke Pines

Zip 33024 Country Broward

3. Mailing Address
SFCMN - 8362 Pines Blvd

Suite, Apt. #, etc.
#184

City & State
Pembroke Pines

Zip 33024 Country Broward

4. FEI Number
65 0325088

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

Ricki Logan
c/o SFCMN
8362 Pines Blvd #184
Pembroke Pines, FL 33025

7. Name and Address of New Registered Agent

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 Ricki S. Logan Ricki S. Logan 5/2/00
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	PRESIDENT - BROWARD Ricki S. Logan 9491 Palm Cir. S. #207 Pembroke Pines, FL 33024	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VICE~~ ~~FATIMA RIVERA-SMITH~~ P	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT - MIAMI-DADE FATIMA RIVERA-SMITH 3169 N.W. 72ND AVE MARGATE, FL 33063	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY BETTY STOVER 4000 N. Hills Drive, #24 Hollywood, FL 33021	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER MARGIE HELFAN 3129 W. Hallandale Bch Blvd Pembroke	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/99)

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: Ricki S. Logan July 8, 2000 954-435-9669
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Ricki S. Logan