

2000 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED
Jun 19, 2000 8:00 am
Secretary of State

05-17-2000 90870 016 ****61.25

DOCUMENT # N48662

1. Entity Name

VOTER'S COUNCIL OF NORTH MIAMI BEACH, INC.

(R)

Principal Place of Business

1520 NE 152ND TER
NORTH MIAMI BEACH FL 33162

Mailing Address

1535 NE 152 TERR
NORTH MIAMI BEACH FL 33162-5968
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

59-2491274

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAZEL CRAWFORD
1520 NE 152ND TERRACE
N MIAMI BEACH FL 33162-1272

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 P
NAME WASHINGTON, BRENDA
STREET ADDRESS 1590 NE 152 ST
CITY-ST-ZIP NORTH MIAMI BEACH FL 33162 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V
NAME ROBINSON, WAVERLY
STREET ADDRESS 1425 NE 154TH ST
CITY-ST-ZIP NORTH MIAMI BEACH FL 33162 ☐ Delete

TITLE D
NAME ROBINSON, WAVERLY (Pres.)
STREET ADDRESS 1425 NE 154 ST
CITY-ST-ZIP NORTH MIAMI BEACH FL 33162 ☐ Change ☐ Addition

TITLE S
NAME DOHM, ATHENIA
STREET ADDRESS 1450 NE 149TH ST
CITY-ST-ZIP NORTH MIAMI BEACH FL ☐ Delete

TITLE D
NAME HAZEL SMITH (V. Pres.)
STREET ADDRESS 1449 NE 154TH ST
CITY-ST-ZIP NORTH MIAMI BEACH FL 33162 ☐ Change ☐ Addition

TITLE T
NAME JACKSON, YVONNE
STREET ADDRESS 1535 NE 152ND TERR
CITY-ST-ZIP NORTH MIAMI FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME CRAWFORD, HAZEL
STREET ADDRESS 1520 NE 152ND TERRACE
CITY-ST-ZIP NORTH MIAMI BEACH FL 33162 ☒ Delete

TITLE D
NAME IOLA CRAWFORD
STREET ADDRESS 1520 NE 152ND TERR
CITY-ST-ZIP N. Miami Beach, FL 33162 ☒ Change ☐ Addition

TITLE D
NAME STARKE, DAVID
STREET ADDRESS 1980 NE 187TH DR
CITY-ST-ZIP NORTH MIAMI BEACH FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-00

Date

305-947-4597

Daytime Phone #

CR2E037 (9/99)