

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000004338

1. Entity Name

JUBILEE COMMUNITY DEVELOPMENT CORPORATION

FILED
Feb 05, 2000 8:00 am
Secretary of State

02-05-2000 90032 006 ****70.00

Principal Place of Business

Mailing Address

742 NW 12TH AVENUE
MIAMI FL 33136
US

742 NW 12TH AVENUE
MIAMI FL 33136-3612
US



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

65-0441965

Applied For

Not Applied

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

GUDORF, FRANCIS V
742 NW 12TH AVE.
MIAMI FL 33136

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	<input type="checkbox"/> Delete
DV	BUNKER, JUDITH	16201 SW 95 TH AVE SUITE 112	MIAMI FL 33157	<input type="checkbox"/>
D	LIMA, FELIX	8360 W FLAGLER ST SUITE 200	MIAMI FL 33144	<input checked="" type="checkbox"/>
CB	MASVIDAL, RAUL	2151 LE JEUNE RD SUITE 202	CORAL GABLES FL 33134	<input checked="" type="checkbox"/>
DS	FIKE, DAVID	11300 NE 2ND AVE	MIAMI FL 33161	<input type="checkbox"/>
D	BROWN, DR J	10066 W INDIGO ST	MIAMI FL 33157	<input type="checkbox"/>
SB	COOPER THOMAS	5651 SW 87TH ST	MIAMI FL 33143	<input checked="" type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
CD	Robert A. Chambers	2701 LeJeune Road, Suite 325	Coral Gables, Florida 33134	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DT	Martha S. Tabio	1801 SW 1st Street	Miami, Florida 33135	<input checked="" type="checkbox"/>	<input type="checkbox"/>
P	Francis V. Gudorf	742 NW 12th Avenue	Miami, FL 33136	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Pedro J. Garcia	9955 NW 116th Way, Suite 10	Miami, FL 33178	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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: *Francis V. Gudorf*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/2000 305-326-8900
Date Daytime Phone #