

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

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90194 050 ****61.25

DOCUMENT # N94000002429

1. Entity Name

THE HOUSING AUTHORITY OF THE CITY OF NORTH LAUDERDALE, FLORIDA, INC.



Principal Place of Business

**701 SOUTHWEST 71ST AVENUE
NORTH LAUDERDALE FL 33068-2395**

Mailing Address

**701 SOUTHWEST 71ST AVENUE
NORTH LAUDERDALE FL 33068-2395
US**

90010301



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **65-0686260**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GOREN, SAMUEL M ESQ.
3099 E. COMMERCIAL BLVD.
SUITE 200
FORT LAUDERDALE FL 33308**

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

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	D	<input type="checkbox"/> Delete
NAME	ROLDAN, NIVA	
STREET ADDRESS	701 SOUTHWEST 71ST AVENUE	
CITY-ST-ZIP	NORTH LAUDERDALE FL 33068-2395	
TITLE	D	<input type="checkbox"/> Delete
NAME	MAHARAJ, RAMSURAT	
STREET ADDRESS	701 SOUTHWEST 71ST AVENUE	
CITY-ST-ZIP	NORTH LAUDERDALE FL 33068-2395	
TITLE	D	<input type="checkbox"/> Delete
NAME	AMBREEN, BHATTY	
STREET ADDRESS	701 SW 71 AVENUE	
CITY-ST-ZIP	NORTH LAUDERDALE FL 33068	
TITLE	D	<input type="checkbox"/> Delete
NAME	DEBOCK, MICHAEL	
STREET ADDRESS	701 SW 71ST AVENUE	
CITY-ST-ZIP	NORTH LAUDERDALE FL 33068-2395	
TITLE		<input type="checkbox"/> Delete
NAME	Milligan, Larry	
STREET ADDRESS	701 Southwest 71st Avenue	
CITY-ST-ZIP	North Lauderdale fl 33068	
TITLE		<input type="checkbox"/> Delete
NAME	Johnson, Mark	
STREET ADDRESS	701 Southwest 71st Avenue	
CITY-ST-ZIP	North Lauderdale FL 33068	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 OF REGISTERED AGENT

CR2E037 (10/02)