

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 04, 2001 08:00 AM****Secretary of State****DOCUMENT # N94000003600****1. Entity Name****ENTERPRISE DEVELOPMENT CORPORATION OF SOUTH FLORIDA****Principal Place of Business**3998 FAU BLVD
SUITE 200
BOCA RATON FL
334316429 US**Mailing Address**3998 FAU BLVD
SUITE 200
BOCA RATON FL
334316429 US**2. Principal Place of Business**3701 FAU BLVD
Suite, Apt. #, etc.
SUITE 210**3. Mailing Address**3701 FAU BLVD
Suite, Apt. #, etc.
SUITE 210City & State
BOCA RATON FLCity & State
BOCA RATON FLZip Country
33431 USZip Country
33431 US**4. FEI Number**
65-0506917Applied 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 AgentSALAMONE ANN B
3998 FAU BLVD SUITE 200
BOCA RATON FL
334316429 US**7. Name and Address of New Registered Agent**Name
WANGBERG LOUIS M
Street Address (P.O. Box Number is Not Acceptable)
3701 FAU BLVD
SUITE 210
City
BOCA RATON FL Zip Code
33431**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 LOUIS M WANGBERG****01/04/2001**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

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**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Actions
VD	COLE JONATHAN E	250 ROYAN PALM WAY	PALM BEACH FL 33480	<input type="checkbox"/> Delete
CD	RODMAN STEELE J	222 LAKEVIEW AVE 4TH FLOOR	W PALM BCH FL 33401	<input checked="" type="checkbox"/> Delete
SD	FELCYN JAMES J	6400 N 6TH WAY	FORT LAUDERDALE FL 33309	<input type="checkbox"/> Delete
TD	MARULIES MARK	2700 S. COMMERCE PARKWAY STE 300	FORT LAUDERDALE FL 33334	<input type="checkbox"/> Delete
VCTD	MONTELEONE RAY	2801 GREEN ST	HOLLYWOOD FL 33020	<input checked="" type="checkbox"/> Delete
PD	SALAMONE ANN B	3998 FAU BLVD STE 200	BOCA RATON FL 33431	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Actions
CD	COLE JONATHAN E	250 ROYAL PALM WAY	PALM BEACH FL 33480	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
SD	HIRSCH JEFFERY A	515 EAST LAS OLAS BLVD SUITE 1500	FORT LAUDERDALE FL 33301	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
VCD	MARGULIES MARK	2700 S. COMMERCE PARKWAY STE 300	WESTON FL 33334	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
PD	WANGBERG LOUIS M	3701 FAU BLVD SUITE 210	BOCA RATON FL 33431	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Louis M Wangberg****PD****01/04/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)