

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Feb 07, 2001 8:00 am**  
**Secretary of State**

02-07-2001 90199 012 \*\*\*\*61.25

**DOCUMENT # N94000004218**

1. Entity Name

**UNITED RESIDENT COUNCIL OF THE HOUSING AUTHORITY**

Principal Place of Business

1701 S.W. 2ND STREET  
#20  
FT LAUDERDALE FL 33312  
US

Mailing Address

1701 S.W. 2ND STREET  
#20  
FT LAUDERDALE FL 33312  
US

2. Principal Place of Business

1701 SW 2 st

3. Mailing Address

1701 SW 2 st

Suite, Apt. #, etc.

# 20

Suite, Apt. #, etc.

# 20

City & State

FTL, FL

City & State

FTL, FL

Zip

33312

Country

Broward

Zip

33312

Country

Broward

6. Name and Address of Current Registered Agent

BROWN, MERCEDES

1701 S.W. 2ND STREET

#20

FT. LAUDERDALE FL 33312

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

TITLE PD  
NAME WYCHE, BARBARA  
STREET ADDRESS 1436 NW 6TH STREET # 19  
CITY-ST-ZIP FORT LAUDERDALE FL 33311 ☒ Delete

TITLE PD  
NAME WILLIAMS, BARBARA  
STREET ADDRESS 1701 SW 2ND STREET # 18  
CITY-ST-ZIP FORT LAUDERDALE FL 33312 ☒ Delete

TITLE TD  
NAME BROWN, MERCEDES  
STREET ADDRESS 1701 S.W. 2ND #20  
CITY-ST-ZIP FT. LAUDERDALE FL 33312 ☐ Delete

TITLE S  
NAME REED, PINKIE  
STREET ADDRESS 817 NW 13TH AVE #71  
CITY-ST-ZIP FORT LAUDERDALE FL 33311 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME President  
STREET ADDRESS MERCEDES Brown  
CITY-ST-ZIP 1701 SW 2 st # 20  
FTL, FL 33312 ☐ Change ☒ Addition

TITLE PD  
NAME Darlene Burton-Vice Pres  
STREET ADDRESS 1321 NW 9 st # 5  
CITY-ST-ZIP FTL FL 33311 ☐ Change ☒ Addition

TITLE S  
NAME Secretary  
STREET ADDRESS Shirley Carson  
CITY-ST-ZIP 1436 NW 6 st #4  
FTL FL 33312 ☐ Change ☒ Addition

TITLE TD  
NAME Treasury  
STREET ADDRESS Kathy Fisher  
CITY-ST-ZIP 160 SW 18 ave #503  
FTL, FL 33312 ☐ Change ☒ Addition

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

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: Mercedes Brown - Mercedes Brown

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/01

954-467-7818

Date Daytime Phone #

CR2E037 (10/00)