

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004218

FILED
Apr 30, 2004
Secretary of State**Entity Name:** UNITED RESIDENT COUNCIL OF THE HOUSING AUTHORITY OF THE CITY OF FORT
LAUDERDALE, INC.**Current Principal Place of Business:**1701 S.W. 2ND STREET
#20
FT LAUDERDALE, FL 33312 US**New Principal Place of Business:****Current Mailing Address:**1701 S.W. 2ND STREET
#20
FT LAUDERDALE, FL 33312 US**New Mailing Address:****FEI Number:** 65-0587943 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BROWN, MERCEDES
1701 S.W. 2ND STREET
#20
FT. LAUDERDALE, FL 33312 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: BROWN, MERCEDES
Address: 1701 SW 2 ST 20
City-St-Zip: FORT LAUDERDALE, FL 33312**Title:** S () Delete
Name: CARSON, SHIRLEY
Address: 1436 NW 6 ST 4
City-St-Zip: FT. LAUDERDALE, FL 33312**Title:** TD () Delete
Name: FISHER, KATHY
Address: 100 SW 18 AV 503
City-St-Zip: FORT LAUDERDALE, FL 33312**Title:** PDVP () Delete
Name: HALL, MARGIE
Address: 1701 SW 2 ST. #17
City-St-Zip: FORT LAUDERDALE, FL 33312**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** PDVP (X) Change () Addition
Name: WOODS, MARCENIA
Address: 302G W DC 57
City-St-Zip: FT. LAUDERDALE, FL 33311**Title:** TD (X) Change () Addition
Name: SWINTON, JOSEPHINE
Address: 2346 NW 16 ST # 53
City-St-Zip: FORT LAUDERDALE, FL 33311**Title:** S (X) Change () Addition
Name: SCHMIDT, MICHAEL
Address: 425 SW 4 AVE # 403
City-St-Zip: FORT LAUDERDALE, FL 33315

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MERCEDES BROWN

PRES

04/30/2004

Electronic Signature of Signing Officer or Director

Date