

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N94000005342**

1. Entity Name

FORT LAUDERDALE PLAYERS, INC.

Principal Place of Business

**104 SE 1ST ST.
FORT LAUDERDALE FL 33301-1924
US**

Mailing Address

**104 SE 1ST ST.
FORT LAUDERDALE FL 33301-1924
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0537335

Applied For

Not Applicable

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

**WEISMAN, DAVID
11901 PICEDILLY PL
DAVIE FL 33325**

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.

President

(NOTE: Registered Agent signature required when reinstating)

DATE

1-05-01**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 ☐ Delete**DT
WEISMAN, BETSY
11901 PICADILLY PL
DAVIE FL 33325**TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ Delete**DS
GARBER, SUSAN
700 SE 5TH TERRACE
POMPANO BEACH FL**TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ Delete**DV
MICHELS, SONDR A
101 EL DORADO PARKWAY
PLANTATION FL 33317**TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ Delete**DT
WILLIS, ROBERT B
260 NW 17TH COURT #604
FT LAUDERDALE FL**TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete**DV
MURSULI, MEREDITH
14411 NW 83 PLACE
MIAMI LAKES FL 33016**TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete**DP
WEISMAN, DAVID
11901 PICADILLY PL
DAVIE FL 33325**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☒ Addition**~~DT~~
COLE, DANA
117 Lake Emerald Dr. #202
Oakland Pk, FL 33309**TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ Change ☒ Addition**~~DS~~
ROZIER, ANGELA
13621 SW 17 CT
MIRAMAR, FL 33027**TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☒ Addition**~~DT~~
THOMAS, ANGELA
1012 S 19 AVE
HOLLYWOOD, FL 33020**TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☒ Addition**~~D~~
LONDON, AMY
1413 SW 109 WAY
FORT LAUD. FL 33324**TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ Change ☐ Addition**~~DP~~**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-04-01**954760.7171**

0045127

CR2E037 (10/00)