

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Aug 23, 2001 08:00 AM
Secretary of State

DOCUMENT # N94000005669

1. Entity Name
 SOUTH FLORIDA RECYCLING COALITION, INC.

Principal Place of Business 110 SE 6TH ST 28TH FLOOR 15TH FLOOR FT LAUDERDALE 33301 US	FL	Mailing Address 110 SE 6TH ST 28TH FLOOR 15TH FLOOR FT LAUDERDALE 33301 US	FL
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2. Principal Place of Business 110 SE 6TH ST., 15TH FLOOR Suite, Apt. #, etc.	3. Mailing Address C/O DANIEL E. TAYLOR, ESQ. Suite, Apt. #, etc. 110 SE 6TH ST., 15TH FLOOR
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City & State FT LAUDERDALE FL	City & State FT LAUDERDALE FL
Zip 33301	Country US

4. FEI Number
65-0538262

Applied 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 Agent

SMITH DENNIS D
 110 SE 6TH ST 28TH FLOOR
 15TH FLOOR
 FT LAUDERDALE FL
 33301 US

7. Name and Address of New Registered Agent

Name
 SMITH DENNIS D
 Street Address (P.O. Box Number is Not Acceptable)
 110 SE 6TH ST
 15TH FLOOR
 City
 FT LAUDERDALE FL Zip Code
 33301

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 DENNIS D. SMITH 08/23/2001
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	D	<input type="checkbox"/> Delete
NAME	GROSSMAN NICKI	
STREET ADDRESS	200 EAST LAS OLAS BLVD., SUITE 1500	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	
TITLE	D	<input type="checkbox"/> Delete
NAME	HOBBS CAROL	
STREET ADDRESS	200 EAST LAS OLAS BLVD.	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	
TITLE	D	<input type="checkbox"/> Delete
NAME	MASON DEBBIE	
STREET ADDRESS	4401 WEST TRADEWINDS AVENUE #207	
CITY-ST-ZIP	LAUDERDALE-BY-THE-SEA FL 33308	
TITLE	D	<input type="checkbox"/> Delete
NAME	TAYLOR DANIEL E.	
STREET ADDRESS	110 SE 6TH ST., 15TH FLOOR	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	P	<input type="checkbox"/> Delete
NAME	SMITH DENNIS DUSTIN	
STREET ADDRESS	110 SE 6TH ST., 15TH FLOOR	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TAYLOR DANIEL E	
STREET ADDRESS	110 SE 6TH ST., 15TH FLOOR	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH DENNIS D	
STREET ADDRESS	110 SE 6TH ST., 15TH FLOOR	
CITY-ST-ZIP	FT LAUDERDALE FL	
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)(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: DANIEL E. TAYLOR D 08/23/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E037 (11/00)