

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90110 006 ****61.25

DOCUMENT # N95000003507

1. Entity Name

Pembroke Pines Villagers, Inc.

DO NOT WRITE IN THIS SPACE

B0056795

2. Principal Place of Business

6700 S.W. 13 St.

3. Mailing Address

P.O. Box 5763

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Pembroke Pines, FL

City & State

Pembroke Pines, FL

4. FEI Number

65-0596090

Applied For

Not Applicable

Zip 33023

Country USA

Zip 33024

Country USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of Current Registered Agent

Name Randy Arrowsmith

Street Address (P.O. Box Number is Not Acceptable)

300 S.W. 67 Terrace

City Pembroke Pines, **FL**

Zip Code 33023

**DO NOT WRITE
IN THIS SPACE**

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 Randy Arrowsmith, Pres.

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

(NOTE: Registered Agent signature required when reinstating)

DATE 3/19/02

FEE IS \$61.25

Initial or Amended UBR

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 P
NAME Randy Arrowsmith
STREET ADDRESS 300 S.W. 67 Terrace
CITY-ST-ZIP Pembroke Pines, FL 33023

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V
NAME James R. Brown
STREET ADDRESS 6711 S.W. 5 St.
CITY-ST-ZIP Pembroke Pines, FL 33023

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S
NAME Flo St. Louis
STREET ADDRESS 6611 S.W. 6 St.
CITY-ST-ZIP Pembroke Pines, FL 33023

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T
NAME Scott Whitney
STREET ADDRESS 6607 S.W. 2 Court
CITY-ST-ZIP Pembroke Pines, FL 33023

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME Una Rhoden
STREET ADDRESS 6931 S.W. 12 St.
CITY-ST-ZIP Pembroke Pines, FL 33023

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME Fanny Wixted
STREET ADDRESS 6620 S.W. 6 St.
CITY-ST-ZIP Pembroke Pines, FL 33023

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Scott Whitney, Treas. *Scott Whitney* 3/18/02 954-989-5105

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037B (12/01)