

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000005034

1. Entity Name

THE ROYAL BRITISH LEGION, THE 1ST FLORIDA BRANCH

FILED
Jul 28, 2000 8:00 am
Secretary of State

07-28-2000 90144 030 ****61.25

Principal Place of Business

C/O MAURICE GRAHAM
331 EAST PROSPECT ROAD
OAKLAND PARK FL 33334

Mailing Address

C/O MAURICE GRAHAM
331 EAST PROSPECT ROAD
OAKLAND PARK FL 33334

2. Principal Place of Business

2206 NW 39TH AVENUE

3. Mailing Address

2206 NW 39TH AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

COCONUT CREEK, FLORIDA

City & State

COCONUT CREEK, FLORIDA

4. FEI Number

65-0637814

Applied For

Not Applicable

Zip

33066

Country

U.S.A.

Zip

33066

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GRAHAM, MAURICE
331 EAST PROSPECT ROAD
OAKLAND PARK FL 33334

7. Name and Address of New Registered Agent

Name GEORGE R. LOW
Street Address (P.O. Box Number is Not Acceptable)
2206 NW 39TH AVENUE

City COCONUT CREEK **FL** Zip Code 33066

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

G.R. LOW

7/22/00

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
After September 13, 2000 min. will be \$236.25

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 P/TR ☐ Delete
NAME YOUNG, ALAN H
STREET ADDRESS 70 ANN LEE LANE
CITY-ST-ZIP TAMARAC FL 33319

TITLE VSTR ☐ Delete
NAME HEATON-JONES, BRIAN
STREET ADDRESS 1453 NW 10TH STREET
CITY-ST-ZIP DANIA FL 33004

TITLE T/TR ☐ Delete
NAME LOW, GEORGE R
STREET ADDRESS 2206 NW 39TH AVENUE
CITY-ST-ZIP COCONUT CREEK FL 33066

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
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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)(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 REQUIRED

7/22/00 (954) 978-6152

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/00)