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Feb 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000001346 (3)**

1. Corporation Name

FLORIDA SPECIAL RESPONSE TEAM-A, INC.



Principal Place of Business 8000 NW 54 STREET LAUDERHILL FL 33351	Mailing Address 8000 NW 54 STREET LAUDERHILL FL 33351
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3. Date Incorporated or Qualified

03/12/1996

4. FEI Number

65-0659159

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WOLFF, SUE C
8000 NW 54 STREET
LAUDERHILL FL 33351**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	WOLFF, EDWARD C	
STREET ADDRESS	8000 NW 54 STREET	
CITY-ST-ZIP	LAUDERHILL FL 33351	

1.1 TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Stacy Jurgens	
1.3 STREET ADDRESS	4311 Crystal Lk Dr.	
1.4 CITY-ST-ZIP	Pompano Beach, FL 33064	

TITLE	D	<input type="checkbox"/> DELETE
NAME	WOLFF, ARTHUR E	
STREET ADDRESS	8000 NW 54 STREET	
CITY-ST-ZIP	LAUDERHILL FL 33351	

2.1 TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	David Praisler	
2.3 STREET ADDRESS	4121 NW 10 St.	
2.4 CITY-ST-ZIP	Coconut Creek, FL 33066	

TITLE	D	<input type="checkbox"/> DELETE
NAME	MARSHALL, JAMES	
STREET ADDRESS	7141 S.W. 2 CT.	
CITY-ST-ZIP	PEMBROKE PINES FL	

3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	LARK, KIM	
STREET ADDRESS	62 NE 109 STREET	
CITY-ST-ZIP	MIAMI SHORES FL	

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	LARK, BERT	
STREET ADDRESS	62 NE 109 STREET	
CITY-ST-ZIP	MIAMI SHORES FL	

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

TITLE	D	<input type="checkbox"/> DELETE
NAME	LORBER, REED	
STREET ADDRESS	5361 NE 17 TERRACE	
CITY-ST-ZIP	FT. LAUDERDALE FL	

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sue C. Wolff
Sue C. Wolff

1/20/98

CR2E037 (10/97)