

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000003313

1. Entity Name

NEIGHBORS UNITED, INC.

Principal Place of Business

1301 WEST 31ST STREET
RIVIERA BEACH FL 33404

Mailing Address

1301 WEST 31ST STREET
RIVIERA BEACH FL 33404

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

65-0700343

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

CUNNINGHAM, ISABELLA
1301 WEST 31ST STREET
RIVIERA BEACH FL 33404

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.

(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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
D
CUNNINGHAM, ISABELLA
STREET ADDRESS
1301 WEST 31ST STREET
CITY-ST-ZIP
RIVIERA BEACH FL 33404 ☐ Delete

TITLE
NAME
☐ Change ☐ Addition

TITLE
NAME
D
CHARLOW, LESSYE W
STREET ADDRESS
1241 W 33RD STREET
CITY-ST-ZIP
RIVIERA BEACH FL 33404 ☐ Delete

TITLE
NAME
☐ Change ☐ Addition

TITLE
NAME
D
GAINEY, CHARLES
STREET ADDRESS
1208 W 28TH STREET
CITY-ST-ZIP
RIVIERA BEACH FL 33404 ☐ Delete

TITLE
NAME
☐ Change ☐ Addition

TITLE
NAME
D
FELDER, ROBERT C
STREET ADDRESS
2831 "S" AVENUE
CITY-ST-ZIP
RIVIERA BEACH FL 33404 ☐ Delete

TITLE
NAME
☐ Change ☐ Addition

TITLE
NAME
Elene Shuford
STREET ADDRESS
1325 W. 32nd St
CITY-ST-ZIP
Riviera Beach, Fla. 33404 ☐ Delete

TITLE
NAME
☐ Change ☐ Addition

TITLE
NAME
☐ Delete

TITLE
NAME
☐ 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 #

FILED
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90107 016 ****61.25

CUU40986



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)