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## 2001 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Jan 09, 2001 8:00 am DOCUMENT # N96000003331 Secretary of State 01-09-2001 90010 029 \*\*\*\*61.25 BROWARD AFFORDABLE HOUSING CORPORATION Principal Place of Business Mailing Address 7961 S.W. 10TH STREET 7961 S.W. 10TH STREET 80000572 NORTH LAUDERDALE FL 33068 NORTH LAUDERDALE FL 33068 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0678321 Not Applicable \$8.75 Additional Country Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BECKINSALE, DAVID 7961 S.W. 10TH STREET # B Zip Code FL NORTH LAUDERDALE FL 33068 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: Department of State Trust Fund Contribution. Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition CR2E037 (10/00 PDS TITLE Delete TITLE BACKINSALE, DAVID NAME NAME 7961 SW 10TH ST #B STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP N LAUDERDALE FL 33068 ☐ Addition ☐ Change TD ☐ Defete TITI F TITLE SPANNOS, NERISSA NAME NAME 9715 W BROWARD BLVD #129 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL 33324 Addition TITLE ☐ Change ☐ Delete GLUCKSMAN, JOSEPH NAME NAME 2979 NW 56TH AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL 33313 ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS

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 a

CITY-ST-ZIP

City-St-ZIP

BATTO BECKINSALE, PRES, 1/4/01