

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000004261

1. Entity Name

EARLINGTON HEIGHTS / OLINDA ASSOCIATION, INC

FILED
Apr 04, 2001 8:00 am
Secretary of State

04-04-2001 90496 011 ****61.25

Principal Place of Business

2146 NW 49th Street
MIAMI, FL 33142

Mailing Address

2146 NW 49th Street
MIAMI, FL 33142 ST

2. Principal Place of Business

1901 NW 52nd St.

3. Mailing Address

1901 NW 52nd St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

Applied For

☒ Not Applicable

Zip

33142-3778

Country

USA

Zip

33142-3778

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Virie Lewis
2146 NW 49 St.
MIAMI, FL 33142

7. Name and Address of New Registered Agent

Name

Juan Cochran

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

1901 NW 52nd St

City

MIAMI

FL

Zip Code

33142-3778

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP
C Everett, Timothy ☐ Delete
2140 NW 50th Street
MIAMI, FL 33142

TITLE NAME STREET ADDRESS CITY-ST-ZIP
C Lewis, Virie ☒ Delete
2146 NW 49 St
MIAMI, FL 33142

TITLE NAME STREET ADDRESS CITY-ST-ZIP
S Cochran, Stephanie ☐ Delete
1901 NW 52nd St
MIAMI, FL 33142

TITLE NAME STREET ADDRESS CITY-ST-ZIP
T Spence, Samuel ☐ Delete
2138 NW 49 St
MIAMI, FL 33142

TITLE NAME STREET ADDRESS CITY-ST-ZIP
D Jackson, Mable ☐ Delete
1901 NW 51st St
MIAMI, FL 33142

TITLE NAME STREET ADDRESS CITY-ST-ZIP
D Green, Anne ☐ Delete
1940 NW 47 St
MIAMI, FL 33142

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP
C Cochran, Juan ☐ Change ☒ Addition
1901 NW 52nd St
MIAMI, FL 33142

TITLE NAME STREET ADDRESS CITY-ST-ZIP
C Perry, Elizabeth ☐ Change ☒ Addition
2113 NW 50th St
MIAMI, FL 33142

TITLE NAME STREET ADDRESS CITY-ST-ZIP
D Brown, Paulette ☐ Change ☒ Addition
2110 NW 48 St
MIAMI, FL 33142

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

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP
☐ 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

Juan COCHRAN

Date

3/27/01

Daytime Phone #

(305) 635 6766

CR2E037 (11/00)