

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000004602

1. Entity Name

TROPICAL PINES CIVIC ASSOCIATION, INC.

FILED

Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90319 013 ****61.25

Principal Place of Business

2700 E. OAKLAND PARK BLVD
SUITE D
FORT LAUDERDALE FL 33306
US

Mailing Address

2700 E. OAKLAND PARK BLVD
SUITE D
FORT LAUDERDALE FL 33306
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0695420

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

FANIZZA, JOANNE
2700 E. OAKLAND PARK BLVD
SUITE D
FORT LAUDERDALE FL 33306

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
STREET ADDRESS
CITY-ST-ZIP
D
DODA, ROBERT
2700 E. OAKLAND PARK BLVD, SUITE D
FT. LAUDERDALE FL 33306 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
DODA, JUDY
2700 E. OAKLAND PARK BLVD, SUITE D
FT. LAUDERDALE FL 33306 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
ROXB, LYNN
2700 E. OAKLAND PARK BLVD, SUITE D
FT. LAUDERDALE FL 33306 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
HESTER, GEORGE
2700 E. OAKLAND PARK BLVD, SUITE D
FT. LAUDERDALE FL 33306 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BARNES, MELINDA
2700 E. OAKLAND PARK BLVD, SUITE D
FT. LAUDERDALE FL 33306 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BARNES, ANNE
2700 E. OAKLAND PARK BLVD, SUITE D
FT. LAUDERDALE FL 33306 ☐ Delete

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

Date

Daytime Phone #

CR2E037 (10/00)