

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2003 8:00 am
Secretary of State

08-15-2003 90085 030 ****61.25

DOCUMENT # N96000006309

1. Entity Name

LAUDERDALE BY-THE-SEA MERCHANTS ASSOCIATION, INC



Principal Place of Business

**222 COMMERCIAL BLVD
LAUDERDALE BY-THE-SEA FL 33308**

Mailing Address

**222 COMMERCIAL BLVD
LAUDERDALE BY-THE-SEA FL 33308**

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 **65-0721405**

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

**ALDAHUI, ANGELINA R
222 COMMERCIAL BLVD
LAUDERDALE BY-THE-SEA FL 33308**

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. I am familiar with, and accept the obligations of registered agent.

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
After September 10, 2003, min will be \$236.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VD	<input type="checkbox"/> Delete
NAME	ALDAHUI, ANGELINA MRS.	
STREET ADDRESS	222 COMMERCIAL BLVD	
CITY-ST-ZIP	LAUDERDALE BY-THE-SEA FL 33308	
TITLE	PDS	<input type="checkbox"/> Delete
NAME	KUSZMAR, BRIAN	
STREET ADDRESS	219 COMMERCIAL BLVD	
CITY-ST-ZIP	LAUDERDALE BY-THE-SEA FL 33308	
TITLE	SD	<input type="checkbox"/> Delete
NAME	ZINGARELLI, DONNA	
STREET ADDRESS	219 COMMERCIAL BLVD	
CITY-ST-ZIP	LAUDERDALE BY-THE-SEA FL 33308	
TITLE	PTD	<input type="checkbox"/> Delete
NAME	ADAMS, CHARLES F	
STREET ADDRESS	227 COMMERCIAL BLVD	
CITY-ST-ZIP	LAUDERDALE BY-THE-SEA FL 33308	
TITLE	CHR	<input type="checkbox"/> Delete
NAME	MIELE, LOUIS DR.	
STREET ADDRESS	220 COMMERCIAL BLVD	
CITY-ST-ZIP	LAUDERDALE BY THE SEA FL 33308	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

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:

Angelina R. Aldahui

Aug 10, 2003 - 954958924

CR2E037 (4/03)