

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

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90168 002 ****61.25

DOCUMENT # N97000001104

1. Entity Name

POSITIVE IMAGES OF BROWARD COUNTY, INC.



Principal Place of Business

**2626 W. OAKLAND PARK BLVD.
ROOM 206
FT. LAUDERDALE FL 33311**

Mailing Address

**2626 W. OAKLAND PARK BLVD.
ROOM 206
FT. LAUDERDALE FL 33311**

2. Principal Place of Business

2700 W. Oakland Park Blvd.

Suite, Apt. #, etc.

22

3. Mailing Address

2700 W. Oakland Park Blvd.

Suite, Apt. #, etc.

22

City & State

Oakland Park, Florida

Zip

Country

33309

USA

City & State

Oakland Park, Florida

Zip

Country

33309

USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0750172**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HODGE-CAREY, ROBIN

2610 W OAKLAND PK BLVD

SUITE 201

FORT LAUDERDALE FL 33311

7. Name and Address of New Registered Agent

Patricia Hendrick

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

2700 W. Oakland Park Blvd.

Suite 22

City

Oakland Park

FL

Zip Code

33311

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
HODGE-CAREY, ROBIN
1941 NE 2ND TERRACE
POMPANO BEACH FL 33060 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
TALISMAN, AMY
101 NE 3RD AVENUE
FORT LAUDERDALE FL 33311 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
PEREZ, BROOKE
101 NE 3 AVENUE
FORT LAUDERDALE FL 33311 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BLACK, ELAINE
6015 NW 7TH AVENUE
MIAMI FL 33127 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HANSEN, LAURA
PO BOX 030177
FT. LAUDERDALE FL 33303 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice-President
Melanie Leid
6323 Bay Club Drive, Unit 212
Ft. Lauderdale, FL 33308 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Treasurer
Karen Roberts
112 East Early Road
N. Palm Beach, FL 33408 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Carmen Miller
2000 S. Ocean Blvd., #8K
Lauderdale By The Sea, FL 33062 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Brooke Perez
2701 W. Oakland Park Blvd., Suite100
Ft. Lauderdale, FL 33311 ☒ 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/3/03

(954) 484-1824

CR2E037 (10/02)