

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2002 8:00 am
Secretary of State

02-19-2002 90117 015 ****61.25

0031201

DOCUMENT # N97000002912

1. Entity Name

PINE ISLAND RIDGE DEMOCRATIC CLUB, INC.

Principal Place of Business

%MARVIN SIMON
 2120 SW 92ND TERR 32903
 FORT LAUDERDALE FL 33324
 US

Mailing Address

%MARVIN SIMON
 2120 SW 92ND TERR 32903
 FORT LAUDERDALE FL 33324
 US

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 **65-0132679**

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

SIMON, MARVIN
 2120 SW 92ND TERR
 STE 2903
 FT LAUDERDALE FL 33324

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	DP	<input type="checkbox"/> Delete
NAME	SIMON, MARVIN	
STREET ADDRESS	2120 S.W. 92ND TERRACE, SUITE 2903	
CITY-ST-ZIP	FORT LAUDERDALE FL 33324	
TITLE	IVD	<input type="checkbox"/> Delete
NAME	HERSKOVITS, JERRY	
STREET ADDRESS	1703 WHITEHALL DRIVE, #402	
CITY-ST-ZIP	FORT LAUDERDALE FL 33324	
TITLE	ESD	<input type="checkbox"/> Delete
NAME	FASCIANO, VITO FASCIANO, VITALE	
STREET ADDRESS	9850 N. OAK KNOLL CIRCLE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33324	
TITLE	DT	<input checked="" type="checkbox"/> Delete
NAME	LEWIS, SYLVIA	
STREET ADDRESS	1709 WHITEHALL DR	
CITY-ST-ZIP	FORT LAUDERDALE FL 33324	
TITLE	2VP	<input type="checkbox"/> Delete
NAME	TANNEBAUM, NORMA	
STREET ADDRESS	1707 WHITEHALL DR.	
CITY-ST-ZIP	FT. LAUDERDALE FL 33324	
TITLE	TEAS	<input type="checkbox"/> Delete
NAME	WEINER, ED	
STREET ADDRESS	2120 SW 92 TERRACE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33324	

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	
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	

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:

Marvin Simon **PROCESSED** MARVIN SIMON PRES 1/2/02 954-473-1692

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)