

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000003778

1. Entity Name

COMMITTEE OF ONE HUNDRED OF MIAMI BEACH, INC.

**FILED**  
**Mar 14, 2000 8:00 am**  
**Secretary of State**

03-14-2000 90040 007 \*\*\*\*61.25

Principal Place of Business

Mailing Address

555 N.E. 15 STREET #25-K  
MIAMI FL 33132

555 N.E. 15 STREET #25-K  
MIAMI FL 33132-1404

2. Principal Place of Business

269 GIRALDA AVENUE

3. Mailing Address

269 GIRALDA AVENUE

Suite, Apt. #, etc.

SUITE 302

Suite, Apt. #, etc.

SUITE 302

City & State

CORAL GABLES, FL

City & State

CORAL GABLES, FL

Zip

33134

Country

U.S.A.

Zip

33134

Country

U.S.A.



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2020710

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

Name

GAMLING, FRANK R  
%LAW OFFICE OF FERTIG & GRAMLING  
200 S.E. 13TH ST.  
FT. LAUDERDALE FL 33316

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 ☐ Delete  
NAME DP  
STREET ADDRESS GALLAGHER, PHIL C  
CITY-ST-ZIP 555 N.E. 15 STREET #25-K  
MIAMI FL 33132

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

TITLE ☐ Delete  
NAME DV  
STREET ADDRESS GRAMLING, FRANK R  
CITY-ST-ZIP 555 N.E. 15 STREET #25-K  
MIAMI FL 33132

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

TITLE ☐ Delete  
NAME V  
STREET ADDRESS STANTON, FRED R  
CITY-ST-ZIP 555 N.E. 15 STREET #25-K  
MIAMI FL 33132

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

TITLE ☐ Delete  
NAME DT  
STREET ADDRESS SANFORD, DAVE  
CITY-ST-ZIP 11111 BISCANYNE BLVD-#558  
MIAMI FL 33181

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

TITLE ☐ Delete  
NAME ED  
STREET ADDRESS NEUMAN, SUSAN  
CITY-ST-ZIP 555 N.E. 15 STREET #25-K  
MIAMI FL 33132

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

*FRANK R. GRAMLING*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/28/00

305-945-6250

CR2E037 (9/99)