

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000004256

1. Entity Name

GWEN CHERRY APARTMENTS RESIDENT ASSOCIATION, INC

FILED
Aug 28, 2000 8:00 am
Secretary of State

08-28-2000 90039 007 ****70.00

Principal Place of Business

GWEN CHERRY APARTMENTS
2099 NW 23RD STREET
MIAMI FL 33142

Mailing Address

GWEN CHERRY APARTMENTS
2099 NW 23RD STREET
MIAMI FL 33142

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

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

~~COLE, CAROL~~
C/O GWEN CHERRY APARTMENTS
2099 NW 23RD STREET
MIAMI FL 33142

Name

Pamela Johnson

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

c/o Gwen Cherry Apartments

2099 NW 23rd Street

City

Miami

FL

Zip Code

33142

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

Pamela G. Johnson

Pamela Johnson, Correspondence Sec. 8/1/00

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 13, 2000 min. will be \$236.25

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 VD
STREET ADDRESS MCCARTHY, SELENA
CITY-ST-ZIP 1311 NW 24 STREET
MIAMI FL 33142

TITLE ☒ Change ☐ Addition
NAME VD
STREET ADDRESS Williams, Portia
CITY-ST-ZIP 1237 NW24 Street
Miami, FL 33142

TITLE ☐ Delete
NAME TD
STREET ADDRESS WALDEN, BERTHA
CITY-ST-ZIP 1235 NW 35TH ST
MIAMI FL 33142

TITLE ☒ Change ☐ Addition
NAME TD
STREET ADDRESS McCarthy, Selena
CITY-ST-ZIP 1026 NW 25th Street
Miami, FL 33127

TITLE ☐ Delete
NAME SD
STREET ADDRESS COLE, CAROL
CITY-ST-ZIP 2353 NW 21ST AVE
MIAMI FL 33142

TITLE ☒ Change ☐ Addition
NAME SD
STREET ADDRESS Feliciano, Maria
CITY-ST-ZIP 1239 NW 24 Street
Miami, FL 33142

TITLE ☐ Delete
NAME PD
STREET ADDRESS CLARKE, FAYE
CITY-ST-ZIP 3013 NW 13TH AVE
MIAMI FL 33142

TITLE ☒ Change ☐ Addition
NAME PD
STREET ADDRESS Johnson, Elaine
CITY-ST-ZIP 2026 NW 19 Terrace
Miami, FL 33125

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME SD
STREET ADDRESS Johnson, Pamela
CITY-ST-ZIP 2840 NW 10 Avenue
Miami, FL 33127

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:

Pamela Johnson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pamela Johnson, President

305-635-6336

Date

Daytime Phone #

CR2E037 (5/00)