

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000005798

1. Entity Name

PALMETTO BAY STEERING COMMITTEE, INC.

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90272 041 ****61.25

Principal Place of Business

Mailing Address

17415 SOUTH DIXIE HIGHWAY
MIAMI FL 33157-5434

17415 SOUTH DIXIE HIGHWAY
MIAMI FL 33157-5434

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

65-0804536

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LUDOVICI, EDWARD P ESQ
17415 SOUTH DIXIE HIGHWAY
MIAMI FL 33157-5434

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 NAME STREET ADDRESS CITY-ST-ZIP	DT LUDOVICI, EDWARD P 17415 S DIXIE HWY MIAMI FL 33157	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP PARISER, BRIAN W 9130 SOUTH DADELAND BLVD. #1511 MIAMI FL 33156	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP FLINN, EUGENE P JR 1099 SW LE JEUNE ROAD MIAMI FL 33134	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DR TAYLOR, ALLEN 15905 SW 77 CT MIAMI FL 33157	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT ROBINSON, KENNETH H 15605 SW 77 CT MIAMI FL 33157	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS GERALD, BEVERLY F 14271 SW 74 CT MIAMI FL 33158	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P FLINN, EUGENE P JR 8603 SOUTH DIXIE HIGHWAY #412 PINECREST FL 33143	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/VP PARISER, BRIAN W 9130 SOUTH DADELAND BLVD #1511 MIAMI FL 33156	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/VP LUDOVICI, EDWARD P 17415 SOUTH DIXIE HIGHWAY MIAMI FL 33157-5491	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/T ROBINSON, KENNETH H 15605 SW 77 COURT MIAMI FL 33157	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/S GERALD, BEVERLY F 14271 SW 74 COURT MIAMI FL 33158	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAVOIE, JULIE 7461 SW 175 STREET MIAMI FL 33157	<input checked="" type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/11/00 305-235-2161