

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000005825

1. Entity Name

LAUDERDALE LAKES BASKETBALL ASSOCIATION, INC.

Principal Place of Business

Mailing Address

4331 N.W. 36TH STREET
LAUDERDALE LAKES FL 33319

4331 N.W. 36TH STREET
LAUDERDALE LAKES FL 33319

2. Principal Place of Business

3. Mailing Address

P.O. Box 490338

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Lauderdale Lks. FL

Zip

Country

33349-0338

Country

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COLEMAN, FRANK
2590 NW 34 TERR
LAUDERHILL LAKES FL 33319

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
After September 12, 2001, 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 PD
NAME COLEMAN, FRANK
STREET ADDRESS 2590 N.W. 34TH TERRACE
CITY-ST-ZIP LAUDERDALE LAKES FL 33319 ☐ Delete

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

TITLE SD
NAME BASTIAN, PAT
STREET ADDRESS 3080 NW 20TH STREET
CITY-ST-ZIP FT. LAUDERDALE FL 33311 ☐ Delete

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

TITLE TD
NAME BOWENS, JOHN F
STREET ADDRESS 4317 N.W. 45TH AVENUE
CITY-ST-ZIP LAUDERDALE LAKES FL 33319 ☐ Delete

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

TITLE D
NAME SMITH, ISSAC
STREET ADDRESS 2581 NW 56TH AVE SUITE C
CITY-ST-ZIP LAUDERHILL FL 33313 ☐ Delete

TITLE D
NAME Clark, Tammie
STREET ADDRESS 3590 NW 34 Terrace
CITY-ST-ZIP FT. Lauderdale, FL 33311 ☐ Change ☒ Addition

TITLE D
NAME POWELL, WAYNE
STREET ADDRESS 1874 NW 52 AVE
CITY-ST-ZIP SUNRISE FL 33313 ☐ Delete

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

TITLE D
NAME NESMITH, CARL
STREET ADDRESS 4249 NW 37 TERR
CITY-ST-ZIP LAUDERDALE LAKES FL 33311 ☐ Delete

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)(f), 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: John F. Bowens / John Bowens

Aug. 15th 2001 258-7558 (954)

FILED
Sep 06, 2001 8:00 am
Secretary of State

09-06-2001 90259 023 ****61.25



DO NOT WRITE IN THIS SPACE

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