

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000004636

1. Entity Name

SOUTH FLORIDA TALLIGATORS, INC.

Principal Place of Business

15220 S.W. 81 LANE
MIAMI FL 33193

Mailing Address

P.O. BOX 11382
FT. LAUDERDALE FL 33339

2. Principal Place of Business

4395 River Pines Ct
Suite, Apt. #, etc.

3. Mailing Address

PO Box 1146
Suite, Apt. #, etc.

City & State

Tequesta, FL

City & State

Deerfield Beach, FL

Zip

33469

Country

Palm Beach

Zip

33443-1446

Country

Broward

4. FEI Number

NOT APPLICABLE

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MOWEN, THEODORE J JR
15220 S.W. 81 LANE
MIAMI FL 33193

7. Name and Address of New Registered Agent

Name: Deborah Nelson
Street Address (P.O. Box Number is Not Acceptable)

4395 River Pines Ct

City: Tequesta

FL

Zip Code: 33469

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: *Deborah Nelson*

Signature, typed or printed name of registered agent with title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/19/01

DATE

FILE NOW:
FEE IS \$61.25

CK# 1009

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

TITLE	DP	☐ Delete
NAME	NIELSEN, KRISTEN	
STREET ADDRESS	17364 BOCA CLUB BLVD. #508	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE	DVP	☐ Delete
NAME	AMWAY, JO-ANN	
STREET ADDRESS	155 ISLE OF VENICE, STE. 402	
CITY-ST-ZIP	FT. LAUDERDALE FL 33301	
TITLE	DVP	☐ Delete
NAME	SNEARY, JUDY	
STREET ADDRESS	367 SOUTH FEDERAL HIGHWAY #324-C	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	
TITLE	DS	☐ Delete
NAME	FOUNO, NORINE	
STREET ADDRESS	6130 N.W. TERRACE	
CITY-ST-ZIP	WEST PALM BEACH FL 33408	
TITLE	DT	☐ Delete
NAME	RODRIGUEZ, MARY	
STREET ADDRESS	2841 N. OCEAN BLVD., #1208	
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	☒ Change ☐ Addition
NAME	William Barrett	
STREET ADDRESS	2240 SE Letha Court, Apt 6	
CITY-ST-ZIP	Stuart, FL 34994	
TITLE	1st VP Membership	☒ Change ☐ Addition
NAME	Charles Chipley	
STREET ADDRESS	7960 Edgewater Dr.	
CITY-ST-ZIP	West Palm Beach, FL 33406	
TITLE	2nd VP Social	☒ Change ☐ Addition
NAME	Remy Ben-Ari	
STREET ADDRESS	805 SW 1st Court	
CITY-ST-ZIP	Bounton Beach, FL 33426	
TITLE	Secretary	☒ Change ☐ Addition
NAME	Rene Arnold	
STREET ADDRESS	3095 N. Course Dr #112	
CITY-ST-ZIP	Pompano Beach, FL 33069	
TITLE	Treasurer	☒ Change ☐ Addition
NAME	Deborah Nelson	
STREET ADDRESS	4395 River Pines Ct	
CITY-ST-ZIP	Tequesta, FL 33469	
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: *Deborah Nelson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/19/01

Date

561-999-1196

Daytime Phone #

CR2E037 (10/00)