## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 04, 2000 8:00 am Secretary of State DOCUMENT # N98000004731 1. Entity Name DEEDCO BEACH APARTMENTS, INC. 04-04-2000 90006 029 \*\*\*\*70.00 Mailing Address Principal Place of Business C/O DEEDCO C/O DEEDCO 141 N.E. 3RD AVE. SUITE 500 141 N.E. 3RD AVE. SUITE 500 MIAMI FL 33132-2221 MIAMI FL 33132 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0864787 Not Applicable Zip\_\_\_\_\_. Country \$8.75 Additional Zip Country XX 5.- Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Arthor Jackson Street Address (P.O. Box Number is Not Acceptable) 141 N.E. Third Avenue, Suite 500 BUTLER, BERNICE B C/O DEEDCO c/o DEEDCO 141 N.E. 3RD AVE. SUITE 500 Miami Zip Code 33132 **MIAMI FL 33132** 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 delcar ND Arthor Jackson, Executive Director 03/15/00 SIGNATURE agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Change Addition ☐ Delete TITLE TITLE WILLIAMS, LILLIE M NAME NAME STREET ADDRESS 141 N.E. 3RD AVE. SUITE 500 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33132 Change ☐ Addition ☐ Delete TITLE TITLE NAME PHILLIPS, CAESAR STREET ADDRESS STREET ADDRESS 141-N.E. 3RD AVE. SUITE 500 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33132 ☐ Change ☐ Addition D TITLE ☐ Delete TITLE JACKSON, ARTHOR NAMÉ NAME STREET ADDRESS STREET ADDRESS 141 N.E. 3RD AVE. SUITE 500 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33132 Addition TITLE Change n Delete TITLE NAME WINN, SUSAN NAME STREET ADDRESS STREET ADDRESS 141 N.E. 3RD AVE. SUITE 500 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33132** ☐ Change ☐ Addition TITI F ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

SIGNATURE: \_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered

3/16/00

305 577-8080

Daytime Phone #