## **FILED** 2000 UNIFORM BUSINESS REPORT (UBR) OCUMENT # N9800006237 03-08-2000 90030 001 \*\*\*\*61.25 BROWARD COUNTY ARCHAEOLOGICAL SOCIETY, INC.

Mar 08, 2000 8:00 am Secretary of State

	e of Business	Mailing Address							
6820 NOVA DE APT 6-201	RIVE	6820 NOVA DRIVE APT 6-201		}					
DAVIE FL 3331	7	DAVIE FL 33317-7437		}					
2. Principal P	face of Business	3. Mailing Address							
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		DAVIE F			. TET VOITIGE	65-08851	91	No	t Applicable
Zip 333	Country U.S. A.	333/7	Country U-S-A	4. 5	. Certificate o	of Status Desire	ed 🗀	\$8.75 Add Fee Require	
	6. Name and Address of Current I				. Name and	Address of Ne	w Registered	Agent	
			Name	JAN F	PATRI	CZAK	-		
			Street A	ddress (P.O.	. Box Number	is Not Accept	able)		
FLYNN, PA			67	30 HI	DUA O	L. Al	1 7-1	02	
6820 NOV APT 6-201			DA	vice	ĒĽ				
DAVIE FL			City				F	Zíp Cod	3 / <del>7</del>
	named entity submits this statement for	the nurses of changing its	registered office or	registered :	agent or both	in the state o			21_F
8, The above	named entity submits this statement to	the purpose of changing its	registered diffice of	registered i	agent, or bott	i, iii tile state t	r riorida.		
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SIGNATURE ,	little -		A K. Fl	411	rnes		4/1	1/2002	<u> </u>
9	Signature, typed it dripted name of registered agent a	nd title if applicable (NOT)	E: Registered Agent signati	ure required whe	n reinstating)		• DATÉ		
FILE NOW: FEE IS \$61.25					)				
				\$5.00 to Added to		ħ		k Payable to nt of State	
	FILE NOW: FEE IS \$61.25							c Payable to nt of State	
10.		Trust Fund Contrib		Added to	Fees		Departme		
<b>10.</b> NTLE	FEE IS \$61.25  OFFICERS AND DIR	Trust Fund Contrib	ttion.	Added to	Fees		Departme	nt of State	
TITLE NAME	PD PASCUCCI, RUDOLPH F	Trust Fund Contrib	11. TITLE NAME	Added to	Fees		Departme	nt of State	110
TITLE NAME STREET ADDRESS	PD PASCUCCI, RUDOLPH F 3901 NW 79TH AVE	Trust Fund Contrib	TITLE NAME STREET ADDRESS	Added to	Fees		Departme	nt of State	110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FEE IS \$61.25  OFFICERS AND DIF  PD  PASCUCCI, RUDOLPH F  3901 NW 79TH AVE  DAVIE FL 33024	Trust Fund Contrib	T1. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to	Fees		Departme	INT OF State DIRECTORS IN Change	I 10 Addition
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NAME STREET ADDRESS GITY-ST-ZIP TITLE	PEE IS \$61.25  OFFICERS AND DIFF PD PASCUCCI, RUDOLPH F 3901 NW 79TH AVE DAVIE FL 33024 VD FLYNN, PATRICIA K	Trust Fund Contrib	T1. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to	Fees	NGES TO OFF	Departme	DIRECTORS IN Change	I 10 Addition
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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 recover 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 accurate and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an accurate and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an 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 recovery of the corporation of the cor

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Description

Descrip SIGNATURE: