## 2000 UNIFORM BUSINESS REPORT (UBR)

## 2/2 DOCUMENT # N99000000841 Apr 24, 2000 8:00 am Secretary of State AMERICA'S GAY & LESBIAN ALLIANCE, INC. 02-26-2000 90054 009 \*\*\*\*61.25 Principal Place of Business Mailing Address 3721 S.W. 47TH AVENUE 3721 S.W. 47TH AVENUE SUITE 301 SUITE 301 FT. LAUDERDALE FL 33314 FT. LAUDERDALE FL 33314-2824 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0903731 Not Applicable \$8.75 Additional Country Ζίρ Country Zip 5. Certificate of Status Desired Fee Required 7.-Name and Address of New Registered Agent 6.-Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) GHERMAN, MICHAEL 3721 S.W. 47TH AVENUE SUITE 301 Zip Code City FT. LAUDERDALE FL 33314 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. DATE (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be FILE NOW: 9. Election Campaign Financing Make Check Payable to Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. (66/6)☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME DICKSON, DAVID NAME **CR2E037** STREET ADDRESS STREET ADDRESS 3721 S.W. 47TH AVENUE CITY-ST-ZIP CITY-ST-ZIP <u>FT. LAUDERDALE FL 33314</u> ☐ Change ☐ Addition TITLE TITLE NAME NAME KOLODIN, LESLIE GREER STREET ADDRESS STREET ADDRESS 3721 S.W. 47TH AVENUE, SUITE 301 CITY-ST-ZIP CITY-ST-ZIP FT. L'AUDERDALE FL 33314 ☐ Change Addition Delete TITLE TITLE D NAME NAME STEWART, ROGER STREET ADDRESS STREET ADDRESS 3721 S.W. 47TH AVENUE, SUITE 301 CITY-ST-71P CITY-ST-ZIP FT. LAUDERDALE FL 33314 ☐ Change ☐ Addition Delete TITLE TITLE NAME WALTERS, RICHARD STREET ADDRESS STREET ADDRESS 3721 S.W. 47TH AVENUE, SUITE 301 CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33314 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IF CITY-ST-7IP 12. I hereby certify that the information supplied with this filling 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 acculate 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