

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000003713

1. Entity Name

THE ALLIANCE OF HOLLYWOOD BEACH COMMUNITIES, INC

Principal Place of Business

320 SOUTH SURF ROAD
SUITE 601
HOLLYWOOD FL 33019

Mailing Address

P O BOX 354
HOLLYWOOD FL 33022

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0937206

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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 D ☐ Delete
NAME STEIB, ALAN T
STREET ADDRESS 320 SOUTH SURF ROAD, SUITE 601
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE D ☒ Change ☒ Addition
NAME CYNTHIA GREENE
STREET ADDRESS 1201 S OCEAN DR #5 1711
CITY-ST-ZIP HOLLYWOOD F 33019

TITLE D ☐ Delete
NAME STEIB, SHELLY
STREET ADDRESS 320 SOUTH SURF ROAD, SUITE 601
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE D ☒ Change ☒ Addition
NAME WATMAN, William
STREET ADDRESS 1401 S OCEAN DR #605
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE D ☒ Delete
NAME SHATZ, KAREN
STREET ADDRESS 441 SOUTH SURF ROAD
CITY-ST-ZIP HOLLYWOOD FL 33019

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

TITLE D ☐ Delete
NAME BENITEZ, EMILIO
STREET ADDRESS 3400 NORTH SURF ROAD, SUITE 7
CITY-ST-ZIP HOLLYWOOD FL 33016

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

TITLE D ☐ Delete
NAME WELSCH, STEVE
STREET ADDRESS 315 DESOTO STREET
CITY-ST-ZIP HOLLYWOOD FL 33019

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

TITLE D ☐ Delete
NAME RIVELLI, SCOTT
STREET ADDRESS 314 HARRISON STREET
CITY-ST-ZIP HOLLYWOOD FL 33019

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11 JAN 02 454-922-8572

CR2E037 (9/01)