2002 UNIFORM BUSINESS REPORT (UBR)

Feb 17, 2002 8:00 am DOCUMENT # N9900004086 **Secretary of State** 1. Entity Name 02-17-2002 90020 011 ****61.25 DANIA BEACH HEIGHTS CIVIC ASSOCIATION, INC. Principal Place of Business Mailing Address 286 S.W. 9 ST. 286 S.W. 9 ST. UPEC2BUL DANIA BEACH FL 33004 DANIA BEACH FL 33004 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 1 NOT APPLICABLE Not Applicable Zip Žip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SILVERNALE, JUNE M 275 SW 9 STREET DANIA FL 33004 City Žip 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 DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW! ÆEE IS \$61.25 \Box Trust Fund Contribution. Added to Fees Department of State 1Ü. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD tresident TITLE TITLE BOHANAN, TEDDYisa youi NAME NAME STREET ADDRESS ୟୁଷ୍ଡ STREET ADDRES 279 SW 4 AVE CITY-ST-ZIP CITY-ST-7IP DANIA-BEACH-FL-33004 Dania Beach Delete ce Presiden W-Change Addition TITLE TITLE Michael Talotta SILVERNALE, SCOTT NAME NAME STREET ADDRESS 605 SW4 AVE. STREET ADDRESS 275 S.W. 9TH ST. CITY-ST-ZIP PC33-20 CITY-ST-ZIP ania Beach DANIA BEACH FL 33004 Delete SD TITLE Secretary M Additio TITLE Royald Costella SILVERNALE, JUNE NAME NAME STREET ADDRESS 275 S.W. 9TH ST. STREET ADDRESS Dania Beach, FC 33504 CITY-ST-ZIP CITY-ST-ZIP DANIA BEACH FL 33004 Addition TD TITLE reasurer TITLE NAME young, Lisa NAME STREET ADDRESS STREET ADDRESS 286 S.W. 9TH STREET CITY-ST-ZIP CITY-ST-ZIP DANIA BEACH FL 33004 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐) Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

SIGNATURE:

12. I hereby certify that the information indicated on this report or supple of the corporation or the receive changed, or on an attachment

es not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information furate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director soute this teport as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if like entropyered.

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