## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 10, 2002 8:00 am Secretary of State DOCUMENT # N99000004628 1. Entity Name 02-10-2002 90017 037 \*\*\*\*61.25 OUTDOOR ADVENTURES KLUB OF SOUTH FLORIDA, INC. Principal Place of Business Mailing Address 5521 POLK SB 5521 POLK SR OIGALT HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0940112 Not Applicable Zip Country \$8.75 Additional Zip Country 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) LONDON, JORDAN 5521 POLK ST HOLLYWOOD FL 33021 City Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable (4) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change Addition PD TITLE TITLE Delete ALLMAN, RUBY J NAME NAME STREET ADDRESS STREET ADDRESS 5521 POLK STREET CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 Vice President and Director VPD TX Change Addition Delete TITI F TITLE NAME RUDIN, MITCH NAME MARY FRAN REED STREET ADDRESS Yacht Elan, 91 Isle of Venice 2771 RIVERDIDE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33065 Fort Lauderdale, FL 33301 (X) Change ☐ Addition **X** Delete TITLE Treasurer and Director TITLE vasinda, jennifer MAME KAREN SMALL NAME STREET ADDRESS STREET ADDRESS 375 NW 87TH TERR 5164 S.W. 28 Avenue CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL 33327 Fort Lauderdale, FL Change ☐ Addition ☐ Delete TITLE TITLE LONDON, JORDAN NAME STREET ADDRESS 5521 POLK STREET STREET ADDRESS CITY-ST-ZIP <del>ONKLAND PARK FL 33303</del> HOLLY WOOD, FL 33021 CITY-ST-ZIP ☐ Change Addition CPMD ☐ Delete TITLE TITLE NAME Slater, Martin NAME STREET ADDRESS 9700 NW 83RD ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMARAC FL 33321 ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

**FILED** 

TORDAN LONDON 9(4357 6290 SIGNATURE:

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

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