

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 02, 2001 8:00 am
Secretary of State

05-02-2001 90196 040 ****61.25

DOCUMENT # N99000004972

1. Entity Name

WEST LAUDERDALE COMMUNITY DEVELOPMENT CORPORATIO

Principal Place of Business

Mailing Address

3601 DAVIE BLVD
FORT LAUDERDALE FL 33312

3601 DAVIE BLVD
FORT LAUDERDALE FL 33312

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

NOT APPLICABLE

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

VANDENHOUTEN, JOSEPH L
3601 DAVIE BLVD
FORT LAUDERDALE FL 33312

Name

JAMES A. COX

Street Address (P.O. Box Number is Not Acceptable)

3601 DAVIE BLVD.

City

FORT LAUDERDALE FL

Zip Code

33312

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

JAMES A. COX

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-12-01

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

TITLE	PD	☐ Delete
NAME	VANDENHOUTEN, JOSEPH L	
STREET ADDRESS	3601 DAVIE BOULEVARD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	SVD	☐ Delete
NAME	COX, JAMES A	
STREET ADDRESS	3601 DAVIE BOULEVARD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	TD	☐ Delete
NAME	CRUISE, HERMAN	
STREET ADDRESS	3601 DAVIE BOULEVARD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	D	☐ Delete
NAME	ABRAHAMS, JEANETTE	
STREET ADDRESS	3601 DAVIE BOULEVARD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	D	☐ Delete
NAME	YORK, ANTHONY R	
STREET ADDRESS	3601 SW DAVIE BLVD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	JAMES A. COX	
STREET ADDRESS	3601 DAVIE BLVD	
CITY-ST-ZIP	FT. LAUD. FL 33312	
TITLE	DIRECTOR	☒ Change ☐ Addition
NAME	HERMAN CRUISE	
STREET ADDRESS	3601 DAVIE BLVD.	
CITY-ST-ZIP	FT. LAUD. FL 33312	
TITLE	DIRECTOR	☒ Change ☐ Addition
NAME	JOSEPH L. VANDENHOUTEN	
STREET ADDRESS	3601 DAVIE BLVD.	
CITY-ST-ZIP	FT. LAUD. FL 33312	
TITLE	SECRETARY	☒ Change ☐ Addition
NAME	JEANETTE ABRAHAMS	
STREET ADDRESS	3601 DAVIE BLVD.	
CITY-ST-ZIP	FT. LAUD. FL 33312	
TITLE	TREASURER	☒ Change ☐ Addition
NAME	ANTHONY R. YORK	
STREET ADDRESS	3601 DAVIE BLVD.	
CITY-ST-ZIP	FT. LAUD. FL 33312	
TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	MICHAEL DALEY	
STREET ADDRESS	3601 DAVIE BLVD.	
CITY-ST-ZIP	FT. LAUD. FL 33312	

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 another like empowered.

SIGNATURE:

SIGNATURE REQUIRED

JAMES A. COX

4/10/01

564791-8212

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2037 (10/00)