2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000005573

1. Entity Name

CARVER HOMES/MODEL CITIES 517C RESIDENT COUNCIL,

FILED
00 SEP 11 AM 8:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/11/00 900041027 #401.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1600 N.W. 77TH TERRACE MIAMI FL 33147	1600 N.W. 77TH TERRACE MIAMI FL 33147-5762

2. Principal Place of Business	3. Mailing Address
1600 NW 77 Ter	1600 NW 17 Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, Fla	City & State: Miami, Fla.
Zip: 33147 Country: Dade	Zip: 33147 Country: Dade

4. FEI Number ☐ 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
HINES, LOTTIE M 1600 N.W. 77TH TERRACE MIAMI FL 33147	Name: Lottie M Mitchell-Hines Street Address (P.O. Box Number is Not Acceptable): 7831 NW 17 Ave City: Miami FL Zip Code: 33147

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 _____ DATE 7/30/00

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HINES, LOTTIE M 7831 N.W. 17TH AVE. MIAMI FL 33147	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JD Bertha Lue Jones 1600 NW 75th Miami, Fla. 33147	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HARGRETT, CAROLYN 7430 N.W. 19TH AVE. #A MIAMI FL 33147	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Linda Pearson 7430 NW 19th Ave #B Miami Fla, 33147	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PAYNE, VERONICA 7340 N.W. 19TH AVE. MIAMI FL 33147	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD FLEMING, DOROTHY 7441 N.W. 21ST AVE. MIAMI FL 33147	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HOWARD, WILLIE-MAE 7401 N.W. 21ST AVE. MIAMI FL 33147	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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 Lottie M Mitchell Hines 7/30/00 694-2746

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

9/11