

4/11

FILED
May 29, 2002 8:00 am
Secretary of State

04-11-2002 90656 048 ****61.25

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000007070

1. Entity Name

FLORIDA HOMEOWNERSHIP COUNCIL, INC.

Principal Place of Business

5461 N. FEDERAL HIGHWAY
FORT LAUDERDALE FL 33308

Mailing Address

5461 N. FEDERAL HIGHWAY
FORT LAUDERDALE FL 33308

2. Principal Place of Business

3. Mailing Address



DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0964813

☐ Applied For
☐ Not Applicable

Zip

Country

Zip

Country

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

LEVINE & SEGAL, P.A.
 4300 N. UNIVERSITY DRIVE
 SUITE A-108
 FORT LAUDERDALE FL 33351

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 FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP
 PMD KORCOK, MARK
 5461 N. FED HWY
 FORT LAUDERDALE FL 33308

TITLE NAME ☒ Delete
 STREET ADDRESS
 CITY-ST-ZIP
 SPERVE, SAM
 5461 N. FED HWY
 FORT LAUDERDALE FL 33308

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP
 KORCOK, ROBERT
 5461 N. FED HWY
 FORT LAUDERDALE FL 33308

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP
 Denise N-A

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

TITLE NAME ☐ Change ☒ Addition
 STREET ADDRESS
 CITY-ST-ZIP
 EVA KORCOK
 5461 N. Federal Hwy
 Ft. Lauderdale, FL 33308

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

TITLE NAME ☐ Change ☐ Addition
 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]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2-02

Date

954-
 489-9997

Daytime Phone #

CR2E037 (9/01)