

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000014416

1. Entity Name

CHCS OF FLORIDA, INC.

FILED

May 04, 2001 8:00 am
Secretary of State

05-04-2001 90024 043 ***158.75

Principal Place of Business

Mailing Address

3050 UNIVERSAL BLVD
SUITE 150
WESTON FL 33351
US

3050 UNIVERSAL BLVD
SUITE 150
WESTON FL 33351
US

970008



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0557422

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

HARNETT LESNICK & RIPPS P.A.
150 E. PALMETTO PARK ROAD, SUITE 500
BOCA RATON FL 33432-4832

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP
NAME JACOBS, GARY
STREET ADDRESS 3050 UNIVERSAL BLVD SUITE 150
CITY-ST-ZIP WESTON FL ☐ Delete

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

TITLE S
NAME BAUMAN, BRYAN W
STREET ADDRESS 1200 BRICKELL AVE STE 1720
CITY-ST-ZIP MIAMI FL 33131 ☒ Delete

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

TITLE DV
NAME ZIMMERMAN, SUSAN
STREET ADDRESS 3050 UNIVERSAL BLVD SUITE 150
CITY-ST-ZIP WESTON FL ☐ Delete

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

TITLE D
NAME Richard Barasch
STREET ADDRESS 3050 Universal Blvd Suite 150
CITY-ST-ZIP Weston, FL 33331 ☐ Delete

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

TITLE D
NAME Gary Bryant
STREET ADDRESS 3050 Universal Blvd. Suite 150
CITY-ST-ZIP Weston FL 33331 ☐ Delete

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

TITLE D
NAME Robert Waegelin
STREET ADDRESS 3050 Universal Blvd. Suite 150
CITY-ST-ZIP Weston FL 33331 ☐ Delete

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/01

Date

(954) 283-4800

Daytime Phone #

CR2E034 (10/00)