

2000 UNIFORM BUSINESS REPORT (UBR)

0667333

DOCUMENT # P97000094647

1. Entity Name

LEF/HOMESTEAD, INC.

FILED

00 FEB 14 PM 12:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

2601 S BAYSHORE DR
STE 300-A
MIAMI FL 33133-5417
US

ONE GREENWAY PLAZA
SUITE 850
HOUSTON TX 77046-0196
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0798237

Applied For

Not Applicable

Zip

33133-5413

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

FRIEDMAN, DAVID A
2601N S BAYSHORE DR
STE 300-A
MIAMI FL 33133-5417

Miami, Florida 33133-5413

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.

4000003145114--5
-02/23/00--01031--025
****158.75 ****158.75
DATE

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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, 2000 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 ☐ Delete
NAME DP
STREET ADDRESS FRIEDMAN, LEONARD E
CITY-ST-ZIP 848 BRICKELL AVENUE SUITE 1120
MIAMI FL 33131

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS One Greenway Plaza, Suite 850
CITY-ST-ZIP Houston, Texas 77046-0196

TITLE ☐ Delete
NAME V
STREET ADDRESS FRIEDMAN, DAVID A.
CITY-ST-ZIP 848 BRICKELL AVENUE, SUITE 1120
MIAMI FL 33131

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 2601 South Bayshore Drive, Suite 300-A
CITY-ST-ZIP Miami, Florida 33133-5413

TITLE ☐ Delete
NAME S
STREET ADDRESS RAY, SANDRA E.
CITY-ST-ZIP ONE GREENWAY PLAZA, SUITE 850
HOUSTON TX 77046

TITLE ☒ Change ☐ Addition
NAME SV
STREET ADDRESS
CITY-ST-ZIP Houston, Texas 77046-0196

TITLE ☐ Delete
NAME T
STREET ADDRESS SWINKE, DAVID L.
CITY-ST-ZIP ONE GREENWAY PLAZA, SUITE 850
HOUSTON TX 77046

TITLE ☒ Change ☐ Addition
NAME V
STREET ADDRESS
CITY-ST-ZIP Houston, Texas 77046-0196

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME TV
STREET ADDRESS Howard W. Thibaut
CITY-ST-ZIP One Greenway Plaza, Suite 850
Houston, Texas 77046-0196

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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.

SANDRA E. RAY, SECRETARY AND VICE PRESIDENT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

713-850-1850

Daytime Phone #

CR2E034 (9/99)

KE