

# 2000 UNIFORM BUSINESS REPORT (UBR)

0667334

DOCUMENT # P97000101122

1. Entity Name

LEF/NORTHRIDGE, INC.

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business 2601 S BAYSHORE DR STE 300-A MIAMI FL 33133-5417	Mailing Address ONE GREENWAY PLAZA SUITE 850 HOUSTON TX 77046-0196
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip 33133-5413	Country USA	Zip	Country USA

4. FEI Number 65-0798249	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  FRIEDMAN, DAVID A 2601 S BAYSHORE DR MIAMI FL 33133-5417		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable)  City FL Zip Code	
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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
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9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	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. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FRIEDMAN, LEONARD E 848 BRICKELL AVENUE SUITE 1120 MIAMI FL 33131 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition One Greenway Plaza, Suite 850 Houston, Texas 77046-0196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FRIEDMAN, DAVID A 848 BRICKELL AVENUE, SUITE 1120 MIAMI FL 33131 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2601 South Bayshore Drive, Suite 300-A Miami, Florida 33133-5413
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RAY, SANDRA E. ONE GREENWAY PLAZA, SUITE 850 HOUSTON TX 77046 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV 000003145000-000 -02/23/00--01091--009 ****158.75 ****158.75 Houston, Texas 77046-0196 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SWINKE, DAVID L. ONE GREENWAY PLAZA, SUITE 850 HOUSTON TX 77046 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Houston, Texas 77046-0196 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TV Howard W. Thibaut One Greenway Plaza, Suite 850 Houston, Texas 77046-0196 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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.

SANDRA E. RAY, SECRETARY AND VICE PRESIDENT

SIGNATURE:	1-18-00	713-850-1850
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #

CR2E034 (9/99)

SP