## **2000 UNIFORM BUSINESS REPORT (UBR)**

## FILED DOCUMENT # **P98000028657** May 22, 2000 8:00 am Secretary of State 1. Entity Name BANKATLANTIC VENTURE PARTNERS 9, INC. 05-22-2000 90040 032 \*\*\*150.00 Principal Place of Business Mailing Address 1750 E SUNRISE BLVD 1750 E SUNRISE BLVD FORT LAUDERDALE FL 33304-3013 FORT LAUDERDALE FL 33304 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0830955 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GILBERT, GLEN R FURMAN, JACK A Street Address (P.O. Box Number is Not Acceptable) 1750 E SUNRISE BLVD FORT LAUDERDALE FL 33304 1750 EAST SUNRISE BLVD City Zip Cad 04 FT LAUDERDALE 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 GLEN R. GILBERT Executive Vice President inted name of registered agent and title if applicable (NOTE: Hogistered Agent signature required when reinstating) Signature, typed FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PD TITLE TITLE ☐ Delete ABDO, JOHN E NAME NAME STREET ADDRESS STREET ADDRESS 1750 E SUNRISE BLVD CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33304 VTDS ☐ Addition Delete TITLE TITLE GILBERT, GLEN R NAME NAME STREET ADDRESS 1750 E SUNRISE BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33304 ☐ Change ☐ Addition Delete TITLE TITLE LEVAN, JARETT S NAME NAME STREET ADDRESS STREET ADDRESS 1750 E SUNRISE BLVD CITY-ST-ZIP FT LAUDERDALE FL 33304 CITY-ST-ZIP Addition Change ☐ Delete TITLE TITLE LEVAN, ALAN B NAME NAME STREET ADDRESS STREET ADDRESS 1750 E SUNRISE BLVD CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33304 TITLE ☐ Change ☐ Addition Delete TITLE NAME ABDO, FRANK J NAME STREET ADDRESS STREET ADDRESS 1750 E SUNRISE BLVD CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33304 ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

GLEN R. GILBERT Executive Vice President

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR