

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000095724

1. Entity Name

FV, INC.

**FILED**  
**Apr 20, 2000 8:00 am**  
**Secretary of State**

04-20-2000 90070 041 \*\*\*150.00

Principal Place of Business

110 E. BROWARD BLVD.  
FORT LAUDERDALE FL 33301

Mailing Address

110 E. BROWARD BLVD.  
FORT LAUDERDALE FL 33301-3503

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0882691

Applied For

Not Applicable

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

SMITH, DENNIS D  
C/O TRIPP SCOTT  
110 S.E. 6TH STREET, 15TH FLOOR  
FORT LAUDERDALE FL 33301

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, 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	P	<input type="checkbox"/> Delete
NAME	HANRATTY, JOHN	
STREET ADDRESS	110 E BROWARD BLVD	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	TD	<input type="checkbox"/> Delete
NAME	ALLEN, CELESTE V	
STREET ADDRESS	110 E BROWARD BLVD	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	S	<input type="checkbox"/> Delete
NAME	TRIPP, NORMAN	
STREET ADDRESS	110 E BROWARD BLVD	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	ASD	<input type="checkbox"/> Delete
NAME	ARTHUR, ROSALIE V	
STREET ADDRESS	110 E BROWARD BLVD	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	AT	<input checked="" type="checkbox"/> Delete
NAME	FISCHER, ROBERT	
STREET ADDRESS	110 E BROWARD BLVD	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	AS	<input type="checkbox"/> Delete
NAME	SEGAUL, ROBIN	
STREET ADDRESS	110 E BROWARD BLVD	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	AT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Steve Nouss	
STREET ADDRESS	110 E. Broward Blvd.	
CITY-ST-ZIP	Fort Lauderdale, FL 33301	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE:

*Steve Nouss* STEVE NOUSS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/00

Date

954-357-4637

Daytime Phone #

P98000095724  
640160

**FV, INC. EIN 65-0882691**

**Document # P98000095724**

**2000 Uniform Business Report**

Title	D	Addition
Name	William H. Kelly, Jr.	
Street Address	55 East Monroe St, #4620	
City-St-Zip	Chicago, IL 60603	

Title	D	Addition
Name	Edward J. Morse	
Street Address	6363 NW 6 Way, Suite 400	
City-St-Zip	Fort Lauderdale, FL 33309	

Title	D	Addition
Name	John T. Mooney	
Street Address	110 E. Broward Blvd.	
City-St-Zip	Fort Lauderdale, FL 33301	

Title	D	Addition
Name	Michael S. Egan	
Street Address	333 East Las Olas Blvd.	
City-St-Zip	Fort Lauderdale, FL 33301	