

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **706837** (2)

1. Corporation Name

SOUTH FLORIDA SCIENCE MUSEUM, INC.



Principal Place of Business

**4801 DREHER TRAIL NORTH
WEST PALM BEACH FL 33405**

Mailing Address

**4801 DREHER TRAIL NORTH
WEST PALM BEACH FL 33405**

3. Date Incorporated or Qualified
02/17/1964

3a. Date of Last Report
04/26/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number
59-0915177

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LEBOFF, GERALD
3038 MIRO DRIVE N.
PALM BEACH GARDEN FL 33410**

81 Name **Gerald LeBoff**
82 Street Address (P.O. Box Number is Not Acceptable)
3038 Miro Drive N.
83
84 City **Palm Beach Gardens, FL** 85 Zip Code **33410**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Gerald LeBoff

April 26, 1996

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **CTR LEBOFF, GERALD**
STREET ADDRESS **3038 MIRO DRIVE N.**
CITY-ST-ZIP **PALM BEACH GARDENS FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **VTR WURTZEL, LEO**
STREET ADDRESS **3300 S. OCEAN BLVD., APT 102S**
CITY-ST-ZIP **PALM BEACH FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☒ DELETE
NAME **VT LEBOFF, GERALD**
STREET ADDRESS **3038 MIRO DR N**
CITY-ST-ZIP **PALM BCH GDNS FL**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **VTR FEASEL, CHARLES**
STREET ADDRESS **2820 FARRAGUT LANE**
CITY-ST-ZIP **WEST PALM BEACH FL**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **STR MCGINNES, PAUL**
STREET ADDRESS **1005 BEDFORD AVE.**
CITY-ST-ZIP **PALM BEACH GARDEN FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **TTR AYALA, RICARDO**
STREET ADDRESS **977 SADDLE CT.**
CITY-ST-ZIP **LAKE WORTH FL**

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME **T (Treasurer) + TR (Trustee)**
6.3 STREET ADDRESS **Paul Bassaline**
6.4 CITY-ST-ZIP **2050 Portland Ave**
Wellington, FL 33414

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gerald LeBoff

April 26, 1996 407.832-1988

GERALD LEBOFF - CHAIRMAN - BOARD - TRUSTEES

CR2E037 (12/95)