

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 90501 002 \*\*\*\*61.25

**DOCUMENT # 709604**

1. Entity Name  
**PALM BEACH COUNTY BAR ASSOCIATION, INC.**



Principal Place of Business  
**1601 BELVEDERE ROAD  
302 EAST  
WEST PALM BEACH FL 33406  
US**

Mailing Address  
**C/O SERVICIO CENTRE  
STE 302 EAST  
WEST PALM BEACH FL 33406  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1846990**

Applied For

Not Applicable

Zip

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

**BEER, JERALD S.  
515 N. FLAGLER DR.  
WEST PALM BEACH FL 33401**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<b>P</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>SMITH, AMY L.</b>	
STREET ADDRESS	<b>1645 PALM BEACH LAKES BLVD</b>	
CITY-ST-ZIP	<b>W PALM BEACH FL</b>	
TITLE	<b>V</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>COLEMAN, GREGORY W</b>	
STREET ADDRESS	<b>712 U.S. HIGHWAY ONE #300</b>	
CITY-ST-ZIP	<b>NORTH PALM BEACH FL 33408</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>TRELLAS, YVETTE</b>	
STREET ADDRESS	<b>224 DETURA STREET #1300</b>	
CITY-ST-ZIP	<b>WEST PALM BEACH FL 33401</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>KOTZEN, JO ANN</b>	
STREET ADDRESS	<b>224 DATURA STREET #1300</b>	
CITY-ST-ZIP	<b>WEST PALM BEACH FL 33401</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>KLETT, STANLEY D JR</b>	
STREET ADDRESS	<b>4100 RCA BLVD. #100</b>	
CITY-ST-ZIP	<b>PALM BEACH GARDENS FL 33410</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>FARACH, MANUEL</b>	
STREET ADDRESS	<b>1645 NPALM BECH LAKES BLVD., #1200</b>	
CITY-ST-ZIP	<b>WEST PALM BEACH FL 33401</b>	

TITLE	<b>P</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Lisa Small</b>	
STREET ADDRESS	<b>440 Royal Palm Way #100</b>	
CITY-ST-ZIP	<b>Palm Beach, FL 33480</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Theodore Leopold</b>	
STREET ADDRESS	<b>1645 Palm Beach Lakes Blvd. #250</b>	
CITY-ST-ZIP	<b>West Palm Beach, FL 33401</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>V. Lynn Whitfield</b>	
STREET ADDRESS	<b>1700 Palm Beach Lakes Blvd. 7th FL</b>	
CITY-ST-ZIP	<b>West Palm Beach, FL 33401</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Jerald S. Beer</b>	
STREET ADDRESS	<b>515 N. Flagler Drive</b>	
CITY-ST-ZIP	<b>West Palm Beach, FL 33401</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Jerald S. Beer*  
**JERALD S. BEER**

4-23-03 5/16/87-2800

CR2E037 (10/02)