

3/7.

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2001 8:00 am
Secretary of State

03-07-2001 90605 024 ****61.25

DOCUMENT # 730683

1. Entity Name

LIGHTHOUSE BONSAI SOCIETY, INC.

Principal Place of Business

Mailing Address

BOCA RATON COMMUNITY CENTER
 150 NW CRAWFORD BLVD.
 BOCA RATON FL 33432-3785
 US

5430 PINE TREE ROAD
 POMPANO BEACH FL 33067

2. Principal Place of Business

3. Mailing Address

2980 SALERNO WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DELRAY BEACH, FL

Zip

Country

33445**USA**4. FEI Number **65-0092087**

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

GLOVER, WINIFRED
 5430 PINE TREE ROAD
 POMPANO BEACH FL 33067

Name **APRIL GRIGSBY-COHEN**

Street Address (P.O. Box Number is Not Acceptable)

2980 SALERNO WAYCity **DELRAY BEACH****FL**Zip Code **33445**

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.

APRIL GRIGSBY-COHEN**MARCH 2, 2001**

DATE

(NOTE: Registered Agent signature required when reinstating)

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☒ Delete
NAME	GLOVER, WINIFRED	
STREET ADDRESS	5430 PINE TREE RD.ET	
CITY-ST-ZIP	POMPANO BCH FL 33067-4111	
TITLE	D	☒ Delete
NAME	STILLWELL, HELEN	
STREET ADDRESS	7404 NW 75TH STREET	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	VP	☒ Delete
NAME	HENDERSON, GEORGE	
STREET ADDRESS	2308 NE 20 ST	
CITY-ST-ZIP	FT LAUDERDALE FL 33305-2836	
TITLE	T	☐ Delete
NAME	STROM, DAVE	
STREET ADDRESS	9560 S.W. 3 COURT	
CITY-ST-ZIP	PLANTATION FL 33324	
TITLE	D	☒ Delete
NAME	HUMPHREY, SANDY	
STREET ADDRESS	3306 NW 29TH AVE.	
CITY-ST-ZIP	BOCA RATON FL 33315	
TITLE	D	☒ Delete
NAME	HUTCHISON, EDNA	
STREET ADDRESS	6000 NW 29TH AVE.	
CITY-ST-ZIP	BOCA RATON FL 33434	

TITLE	P	☒ Change ☐ Addition
NAME	APRIL GRIGSBY-COHEN	
STREET ADDRESS	2980 SALERNO WAY	
CITY-ST-ZIP	DELRAY BEACH, FL 33445	
TITLE	VP	☒ Change ☐ Addition
NAME	VLADIMIR FOURSA	
STREET ADDRESS	310 CRANES ROOST	
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	
TITLE	S	☒ Change ☐ Addition
NAME	STANLEY ORSOLEK	
STREET ADDRESS	7834 N.W. 78TH AVE	
CITY-ST-ZIP	TAMARAC, FL 33321	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☒ Change ☐ Addition
NAME	GEORGE HENDERSON	
STREET ADDRESS	2308 NE 20TH ST.	
CITY-ST-ZIP	FT LAUDERDALE, FL 33305	
TITLE	D	☒ Change ☐ Addition
NAME	MIKE SULLIVAN	
STREET ADDRESS	11721 SPINNAKER WAY	
CITY-ST-ZIP	COOPER CITY, FL 33026	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL GRIGSBY-COHEN 3-2-2001

Date

Daytime Phone #

CR2E037 (10/00)