

## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000002188

1. Entity Name

PARTNERSHIP FOR A DRUG-FREE AMERICA, INC. ✓

FILED  
Aug 13, 2002 8:00 am  
Secretary of State

08-13-2002 90228 017 \*\*\*\*61.25

Principal Place of Business	Mailing Address
405 LEXINGTON AVENUE NEW YORK NY 10174	405 LEXINGTON AVENUE NEW YORK NY 10174

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

4. FEI Number	Applied For
13-3413627	Not Applicable

5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	

## 6. Name and Address of Current Registered Agent

## 7. Name and Address of New Registered Agent

MAPES, LYNN C  
206 MORTON STREET  
MARATHON FL 33050

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

After September 13, 2002  
min. will be \$236.25

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEAHY, THOMAS 708 THIRD AVENUE, 6TH FLOOR NEW YORK NY 10017 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VERSFELT, DAVID 1251 AVENUE OF THE AMERICAS, 45TH FLOOR NEW YORK NY 10020-1104 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRIMIS, LANCE 4 SILVERBROOK COURT HOLMDEL NJ 07733-2015 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C BURKE, JAMES E 6 CONSTITUTION HILL, EAST PRINCETON NJ 08540 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURKE, DANIEL B 77 WEST 66TH STREET NEW YORK NY 10023 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

2. 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:

SIG Robert J. Caruso  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert Caruso  
Date

8/8/02  
Daytime Phone #

212-922-1560  
Daytime Phone #

CR2F037 (4/02)

*Attachment*  
*#F9300000218 974234*  
**COPILEVITZ & CANTER, LLC**

ATTORNEYS AT LAW

423 W. EIGHTH STREET  
SUITE 400  
KANSAS CITY, MISSOURI 64105  
(816) 472-9000 • FAX (816) 472-5000  
E-MAIL [copcankc@copilevitz-canter.com](mailto:copcankc@copilevitz-canter.com)

August 9, 2002

Uniform Business Report  
Division of Corporations  
PO box 1500  
Tallahassee, FL 32302-1500

Re: Partnership for a Drug-Free America

Dear Sir/Madam:

Enclosed please find the 2002 Uniform Business Report and \$61.25 filing fee for the above referenced organization.

Please contact me at the Missouri location listed above, if you should require any additional information.

Very truly yours,

*Amy Lloyd*

Amy Lloyd  
Legal Assistant  
For the Firm

enc.