

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

FILED
Jun 24, 2003 8:00 am
Secretary of State

06-24-2003 90011 017 ****61.25

DOCUMENT # N00000004790



1. Entity Name
THE PECK FOUNDATION, INC.

Principal Place of Business
**11907 TURTLE BEACH ROAD
NORTH PALM BEACH FL 33408**

Mailing Address
**11907 TURTLE BEACH ROAD
NORTH PALM BEACH FL 33408**

00140636



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **52-2271450**

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

**POSNER, MICHAEL J ESQ
4420 BEACON CIRCLE SUITE 100
WEST PALM BEACH FL 33407**

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: *Michael Posner*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

6-15-03
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	PTT	<input type="checkbox"/> Delete
NAME	PECK, GEORGE	
STREET ADDRESS	11907 TURTLE BEACH ROAD	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE	VT	<input type="checkbox"/> Delete
NAME	PECK, GEORGE C JR	
STREET ADDRESS	11907 TURTLE BEACH ROAD	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE	VT	<input type="checkbox"/> Delete
NAME	PECK, RICHARD E	
STREET ADDRESS	11907 TURTLE BEACH ROAD	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE	VT	<input type="checkbox"/> Delete
NAME	PHILIPS, DEBORAH PECK	
STREET ADDRESS	11907 TURTLE BEACH ROAD	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE	S	<input type="checkbox"/> Delete
NAME	POSNER, MICHAEL J	
STREET ADDRESS	11907 TURTLE BEACH ROAD	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE		<input type="checkbox"/> Delete

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	
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STREET ADDRESS	
CITY-ST-ZIP	
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: *Michael Posner*

6-20-03 232-449-5696

CR2E037 (10/02)