## 2002 UNIFORM BUSINESS REPORT (UBR)

## FILED May 06, 2002 8:00 am Secretary of State DOCUMENT # **N92000000752** 05-06-2002 90106 045 \*\*\*\*61.25 CONNOR MORAN CHILDREN'S CANCER FOUNDATION, INC. Principal Place of Business Mailing Address 2450 METROCENTRE BLVD 19224 COUNTRY CLUB DRIVE W. PALM/BEACH FL 33407 TEQUESTA FL 33469 US 2. Principal Place of Business 3. Mailing Address 4400 N. Congress 4400 N. Congress Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite Suite 110 City & State 4. FEI Number Applied For 'Yalm Brack, F 65-0374021 raine Beach. Nest Not Applicable \$8,75 Additional 5. Certificate of Status Desired Palm Beach 334<u>07</u> 33407 Palm Beach Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) GARRIS, CHARLES E 817 BEACHLAND BLVD VERO BEACH FL 32963 City Zip Code FL 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61,25 П Trust Fund Contribution. Added to Fees **Department of State** OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 (9/01) TITLE ☐ Delete TITLE ☐ Addition SILVER, BRUCE NAME NAME. 7446 BRYSM CRT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE WORTH FL 33467 CITY-ST-ZIP PD TITLE ☐ Addition ☐ Delete TITI F Change FONG, HENRY NAME 2401 PGA BLVD STE 280F STREET ADDRESS STREET ADDRESS CITY-ST-ZIF WPB FL 33410 CITY-ST-ZIP Vice President Delete TITLE Change ▼ Addition Seff VastolA ALBERT, BETTY NAME I Elearlake Center, Ste 1550 STREET ADDRESS 724 7TH CT STREET ADDRESS 250 Australian Aves. CITY-ST-ZIP PLM BCH GARDENS FL 33410 CITY-ST-ZIP 33401 West Paince Beach, Fl TITLE ☐ Delete Change TITLE ☐ Addition MORAN, TERI NAME NAME STREET ADDRESS 2450 METROCENTRE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP West Palm Beach FL 33467 ☐ Delete TITLE ☐ Change ☐ Addition SCHECHTMAN, TOM NAME NAME STREET ADDRESS 3365 BURNS RD, STE 100 STREET ADDRESS CITY-ST-ZIP PALM BEACH GARDENS FL CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition CHARNEY, BERNIE NAME NAME 11107 OAKDALE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH FL CITY-ST-ZIP this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 whered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information supp

SIGNATURE:

indicated on this report or supplemental of the corporation of the receiver of tri changed, or on an attachment with a

with all other like empowered

4/22/02 661-841-5693