

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

FILED
May 07, 2003 8:00 am
Secretary of State

0005022

05-07-2003 90178 032 ****61.25

DOCUMENT # N94000000802

1. Entity Name

**MARGARET A. GUISTETTI PALM BEACH CHAPTER DAR FOU
NDATION, INC.**



Principal Place of Business % JONES, FOSTER, JOHNSTON & STUBBS, P.A. 505 S. FLAGLER DR., #1100 WEST PALM BEACH FL 33401	Mailing Address % JONES, FOSTER, JOHNSTON & STUBBS, P.A. 505 S. FLAGLER DR., #1100 WEST PALM BEACH FL 33401
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2. Principal Place of Business c/o Doane & Doane PA 2000 PGA Blvd. Suite, Apt. #, etc. Suite 4410	3. Mailing Address Doane & Doane PA 2000 PGA Blvd Suite, Apt. #, etc. Suite 4410
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City & State North Palm Beach FL	City & State North Palm Beach FL
Zip 33408	Zip 33408
Country	Country

4. FEI Number **65-6158034** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional
Fee Required**



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**DOANE, REBECCA G
JONES, FOSTER, JOHNSTON & STUBBS, P.A.
505 S. FLAGLER DR., #1100
WEST PALM BEACH FL 33401**

7. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-30-03

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	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	D	DOANE, REBECCA G	505 S. FLAGLER DRIVE, #1100 WEST PALM BEACH FL 33401	<input type="checkbox"/> Delete			
	D	PRICE, AILENE W	311 COCOANUT ROW PALM BEACH FL 33480	<input type="checkbox"/> Delete			
	P	SHEPHERD, NANCY A MRS.	1902 NOTRE DAME DRIVE LAKE WORTH FL 33460-6349	<input type="checkbox"/> Delete			
	S	MORGAN, MARIAN MRS.	9 SLASH PINE VILLA, DELRAY DUNES BOYNTON BEACH FL 33436	<input type="checkbox"/> Delete			
	D	MITCHELL, WILLIAM F MRS.	4766 S. LAKE DRIVE BOYNTON BEACH FL 33436	<input type="checkbox"/> Delete			
	VP	VECELLIO, KATHRYN C MRS.	771 VILLAGE ROAD NORTH PALM BEACH FL 33408	<input type="checkbox"/> Delete			

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:

Rebecca Doane
SIGNATURE REQUIRED

4-30-03

CR2E037 (10/02)