

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000005705

FILED
Mar 10, 2003
Secretary of State

Entity Name: SOROPTIMIST COMMUNITY SERVICE OF BOCA RATON/DEERFIELD BEACH, INC.

Current Principal Place of Business:

306 N.W. 35TH STREET
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

306 N.W. 35TH STREET
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 65-0879425 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COSTELLO, JOHN CPA
1300 N FEDERAL HIGHWAY
SUITE 202
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHMIDT, ELKE
Address: 1452 SE 5TH PLACE
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: T () Delete
Name: BRITTELL, DOREEN
Address: 18800 HAYWOOD TER #2
City-St-Zip: BOCA RATON, FL 33496

Title: D () Delete
Name: CUTAIA, SUSAN
Address: 5599 PORTO FINO DR
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: OSTBLEC, PERNILLE
Address: 1202 NW 14TH STREET
City-St-Zip: BOCA RATON, FL 33486

Title: D (X) Delete
Name: CUMMINGS, CYNTHIA
Address: 1290 GEORGE BUSH BLVD
City-St-Zip: DELRAY BEACH, FL 33483

Title: RS () Delete
Name: SISKOWSKI, CONNIE
Address: 2021 NW 53RD STREET
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: CUMMINGS, CYNTHIA
Address: 1290 GEORGE BUSH BLVD
City-St-Zip: DELRAY BEACH, FL 33483

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CYNTHIA CUMMINGS

T

03/10/2003

Electronic Signature of Signing Officer or Director

_____ Date