2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 09, 2000 08:00 AM DOCUMENT # N9900003202 1. Entity Name **Secretary of State** JUPITER/TEQUESTA SUNRISE ROTARY CLUB ENDOWMENT, INC. Principal Place of Business Mailing Address 801 MAPLEWOOD DRIVE 801 MAPLEWOOD DRIVE SUITE 22A SUITE 22A JUPITER JUPITER FL FL 334588821 334588821 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired X Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BERROCAL 801 MAPLEWOOD DRIVE Street Address (P.O. Box Number is Not Acceptable) SUITE 22A JUPITER FL 334588821 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. 01/09/2000 **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) ญ็หญ่≥าเก็ ก็เรียกได้ FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delate TITLE D X Addition NAME NAME WOOD LISA STREET ADDRESS STPEET ADDRESS 316 4TH STREET CITY-ST-ZIP CITY-ST-ZIP JUPITER FL33458 TITLE ☐ Delete D ☐ Change XI Addition NAME NAME TAMBOR RICHARD STREET ADDRESS STREET ADDRESS 847 DONALD ROSS ROAD CITY-ST-ZIP CITY-ST-ZIP JUNO BEACH \mathbf{FL} 33408 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME NICKERSON DAVID STREET ADDRESS STREET ADDRESS 1001 N. U.S. HIGHWAY ONE, SUITE 304 CITY-ST-ZIP CITY-ST-ZIP JUPITER FL 33477 TITLE ☐ Delete TITLE XI Change ☐ Addition NAME STEINFELD MURRAY STEINFELD MURRAY 3101 PGA BOULEVARD STREET ADDRESS STREET ADDRESS 3101 PGA BOULEVARD CITY-ST-ZIP JUPITER PALM BEACH GARDENS 33401 CITY-ST-ZIP 33410 TITLE X Dalete TID F Change ☐ Addition NAME WILSON ELLEN NAR/F STREET ADDRESS 300 OCEAN TRAIL, #401 STREET ADDRESS CITY-ST-ZIP JUDITER CITY-ST-ZIP FL 33477 TITLE ☐ Delete TITLE Change | ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.