

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90313 041 ****61.25

DOCUMENT # N99000007142

1. Entity Name

COLLABORATIVE DIVORCE LAWYERS ASSOCIATION OF PAL

Principal Place of Business

370 W CAMINO GARDENS BLVD. NO. 300
 BOCA RATON FL 33432

Mailing Address

370 W CAMINO GARDENS BLVD. NO. 300
 BOCA RATON FL 33432

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0960498

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GIRRBACH, KIRK J
5355 TOWN CENTER RD, THE PLAZA
SUITE 1102
BOCA RATON FL 33486

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	P/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Marla L. Killmon
STREET ADDRESS	370 W. Camino Gardens Blvd. # 300
CITY-ST-ZIP	Boca Raton, FL 33432
TITLE	VP/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kirk J Girschach
STREET ADDRESS	5355 Town Center Rd., The Plaza, #1102
CITY-ST-ZIP	Boca Raton, FL 33486
TITLE	S/D (corresponding) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lyme K. Hennessey
STREET ADDRESS	2255 Glades Rd. Atrium 226
CITY-ST-ZIP	Boca Raton, FL 33431
TITLE	S/D (Recording) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jaana Moisio
STREET ADDRESS	5355 Town Center Road #1102
CITY-ST-ZIP	Boca Raton, FL 33486
TITLE	T/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Marianne S. Rantala
STREET ADDRESS	125 Crawford Blvd.
CITY-ST-ZIP	Boca Raton, FL 33432
TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Valerie G. Karouse
STREET ADDRESS	370 W. Camino Gardens Blvd. # 300
CITY-ST-ZIP	Boca Raton, FL 33432

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: Marla L. Killmon P/D 4/22/00 (501) 3679995

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)

11 Continued:

N99900007142

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Title D
Name Donald C. Dowling
Street Add. 151 N.W. 1st Avenue
City-St-Zip Delray Beach, FL 33483

Title D
Name Isabel Julia - Miles
Street Add. 370 W. Camino Gardens Blvd., #300
City-St-Zip Boca Raton, FL 33432

Title D
Name Tammy B. Saltzman
Street Add. 5355 Town Center Rd. #1102
City-St-Zip Boca Raton, FL 33486

W. Miller
Signature