NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90020 001 \*\*\*\*61.25

<b>DOCUM</b>	ENT #	‡ <b>7</b> 3	37037
1. Corporation N	lame	•	

AMARA TEMPLE HOLDING CORPORATION, INC.

Country

Principal Place of Business 3650 R.C.A. BLVD. PO BOX 30335 PALM BEACH GARDENS FL 33410-2704

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

Zip

Mailing Address 3650 R.C.A. BLVD. PO BOX 30335

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28 Zip

PALM BEACH GARDENS FL 33410-2704



3. Date Incorporated or Qualifed

5. Certificate of Status Desired

Trust Fund Contribution

Election Campaign Financing

10/14/1976

23-743 1647

4. FEI Number

9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
		81	Name			
STAMM, BOB J 2883 S.W. MONARCH TRAIL			Ctroot	Address (P.O. Box Number is Not Acceptable)		
			2 Street Address (P.O. Box Number is Not Acceptable)			
				,		
STUART FL 34997				les l 7% Code		
		84	City	FL 85 Zip Code		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the about				compration submits this statement for the purpose of changing its registered		
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE  Stonature, typed or printed name of registered apent and title if applicable. (NOTE: Registered Agent signature regulared when reinstating)  DATE						
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re-	13.	it aignature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VD DELETE	1.1 TITLE		D Change Addition		
NAME	BATCHELOR, DAVID	1.2 NAME		MICHAEL A. SNITKIN		
STREET ADDRESS	9176 166TH WAY NORTH	1.3 STREET	ADDRESS	0710 7117 7 117		
CITY-ST-ZIP	JUPITER FL	1.4 CITY-S		BOYNTON BEACH, FL. 33426		
TITLE _	VD DELETE	2.1 TITLE		D Change Addition		
NAME .	COLEMAN, WALLY	2.2 NAME		DANIEL COLEMAN		
STREET ADDRESS		2.3 STREET	ADDRESS	4221 HYACINTY CIRCLE NORTH		
CITY-ST-ZIP	JENSEN BEACH FL	2. 4 CITY- 8	T-ZIP	PALM BEACH GARDENS, FL. 33410		
TITLE	VD . CELETE	3.1 TITLE		T Change Addition		
NAME	EVERETT, DONALD S	3.2 NAME		TOM THORSEN		
STREET ADDRESS	166 MIRAMAR AVE	3.3 STREET	ADDRESS			
CITY-ST-ZIP	ROYAL PALM BEACH FL	3.4. CITY-S	T-ZIP	3575 MARIA THERESA AVE. WEST PALM BEACH, FL. 33406		
TITLE	<b>VO</b> X D	4.1 TITLE		☐ Change ☐ Addition		
NAME	ORR, ED	4. 2 NAME		The state of the s		
STREET ADDRESS	1709 MANGO CIR	4.3 STREET	ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH FL 33406	4.4 CITY-S	T-ZIP_			
IIILE	SD DELETE	5.1 TITLE		Change Addition		
NAME	THURLOW, GEORGE	5.2 NAME				
STREET ADDRESS	6135 FRANCIS ST	5.3 STREE	ADDRESS			
CITY-ST-ZIP,	PALM BEACH GARDENS FL 33418	5.4 CITY-S	T-ZIP			
TITLE "	DELETE	6.1 TITLE		Change Addition		
NAME		6.2 NAME				
STREET ADDRESS	A March 18	6.3 STREET	ADDRESS			
CITY-ST-ZIP		6.4 CITY-S	T-ZIP			

Country

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

561 6272106

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable