2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 24, 2000 8:00 am Secretary of State DOCUMENT # 732156 1. Entity Name ECONOMIC COUNCIL OF PALM BEACH COUNTY, INC. 01-24-2000 90012 006 ****61.25 Principal Place of Business Mailing Address 1555 PALM BEACH LAKES BLVD. #400 1555 PALM BEACH LAKES BLVD. #400 W PALM BCH FL 33401-2327 W PALM BCH FL 33401-2372 U0009495 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1575003 Not Applicable Country \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) WATKINS, THOMAS D 1555 PALM BEACH LAKES BLVD SUITE 400 City Zin Code WEST PALM BEACH FL 33401 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. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Delete ☐ Change Addition VD TITLE TITLE Stubba, Sidney BROWN, LARRY E NAME NAME 1555 Holm Beach Lakes Blud. #400 STREET ADDRESS 1555 PALM BEACH LAKES BLVD #400 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP West film Beach, FL WEST PALM BEACH FL ☐ Addition SD ☐ Delete TITLE TITLE Elmore, George 1. NAME NAME ELMORE, GEORGE T 1555 Palm Beach Lakes Blud. #400 STREET ADDRESS STREET ADDRESS 1555 PALM BEACH LAKES BLVD #400 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL West folm Beach, FL Addition Delete ☐ Change TITLE TITLE CD SO. noble, Leo E. NAME FAGAN, GREGORY J NAME STREET ADDRESS STREET ADDRESS 1555 PALM BEACH LAKES BLVD #400 1555 Ralm Beach Lakes Blud CITY-ST-ZIP CITY-ST-ZIP <u>West Palm Beach Fl</u> West Palm Beach, FL ☐ Change ☐ Addition TD ☐ Delete TITLE TITLE GOTTLIEB, MORRIS B NAME NAME STREET ADDRESS STREET ADDRESS 1555 PALM BEACH LAKES BLVD #400 CITY-ST-ZIP CITY-ST-ZIP <u>west palm beach fl</u> ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete NAME

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

STREET ADDRESS

CITY - ST - ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

STREET ADDRESS

CITY-ST-ZIP

561 684-155