

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02548

1. Entity Name

THE EDUCATION FOUNDATION OF PALM BEACH COUNTY, I

FILED

May 05, 2000 8:00 am
Secretary of State

05-05-2000 90084 034 ****61.25

Principal Place of Business

1555 PB LAKES BLVD
#400
WEST PALM BEACH FL 33401
US

Mailing Address

1555 PB LAKES BLVD
#400
WEST PALM BEACH FL 33401
US

2. Principal Place of Business

3364 Forest Hill Blvd.

3. Mailing Address

3364 Forest Hill Blvd

Suite, Apt. #, etc.

A-132

Suite, Apt. #, etc.

A-132

City & State

West Palm Beach, FL

City & State

West Palm Beach, FL

Zip

33406

Country

USA

Zip

33406

Country

USA

4. FEI Number

59-2420369

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WATKINS, THOMAS D.
1555 PB LAKES BLVD
#400
WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name Kelly L. Hurley

Street Address (P.O. Box Number is Not Acceptable)

3364 Forest Hill Blvd
Suite A-132

City

West Palm Beach, FL

Zip Code

33406

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

Kelly L. Hurley, Executive Director *Kelly L. Hurley* 4/20/00
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

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	BOWMAN, DARI	
STREET ADDRESS	19198 PINE TREE DRIVE	
CITY-ST-ZIP	TEQUESTA FL 33469	
TITLE	VB	<input type="checkbox"/> Delete
NAME	HURLBURT, BRAD	
STREET ADDRESS	900 EAST ATLANTIC AVE	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	LINK, WENDY S	
STREET ADDRESS	222 LAKEVIEW AVE, #1330	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
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		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Chairman	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Robert G. H. Carroll, III	
STREET ADDRESS	744 Waterway Drive	
CITY-ST-ZIP	North Palm Beach, FL 33408	
TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hurlburt, Brad	
STREET ADDRESS	900 East Atlantic Ave	
CITY-ST-ZIP	Delray Beach, FL 33483	
TITLE	Vice Chairman	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Macon, Rod	
STREET ADDRESS	P.O. Box 8768, 6001 Village Blvd.	
CITY-ST-ZIP	West Palm Beach, FL 33407	
TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Prather, David	
STREET ADDRESS	515 N. Flagler Dr., 10th FL	
CITY-ST-ZIP	West Palm Beach, FL 33401	
TITLE	Executive Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Hurley, Kelly L.	
STREET ADDRESS	1850 N. Congress Ave, #F305	
CITY-ST-ZIP	West Palm Beach, FL 33401	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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.

SIGNATURE:

Kelly L. Hurley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/25/00

Daytime Phone #

561-474-7303

CR2E037 (9/99)