2000 UNIFORM BUSINESS REPORT (UBR)

FILED Sep 14, 2000 8:00 am Secretary of State DOCUMENT # 767027 1. Entity Name INVENTORS SOCIETY OF SOUTH FLORIDA. INC. 9-14-2000 90008 028 ****70.00 Principal Place of Business Mailing Address 7927 CORAL ST 7927 CORAL ST LANTANA FL 33462-6103 LANTANA FL 33462-6103 DOTOGOLS 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 59-2447428 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) WHITE, ROBERT E 7927 CORAL ST LANTANA FL 33462 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. 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 Make Check Pavable to \$5.00 May Be Trust Fund Contribution. After September 13, 2000 min. will be \$236.25 Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITI F ABBY WATERS 81346 ST. ANDREWS BLVD. STEBO9 BOCA RATON FL 33433 NAME LOUGHLIN, RICHARD NAME STREET ADDRESS STREET ADDRESS 1100 THE RESA ST C!TY-ST-ZIP CITY-ST-ZIP STUART FL 34996 Delete Addition TITLE **Change** TITLE FREDDY T.LEE WHITE, ROBERT E NAME NAME 1502 SW 22 ND AVE STREET ADDRESS STREET ADDRESS 7937 CORAL ST CITY-ST-ZIE BOYNTON BEACH FL 33426 CITY-ST-7IP LANTANA FL 33462-6103 Addition TITLE Delete TITLE NAME ZAREMBA, JOANNA A NAME STREET ADDRESS STREET ADDRESS 5605 NW 49TH AVE CITY-ST-ZIP CITY-ST-ZIP TAMARAC FL 33319 🔀 Change ■ Addition TITLE 📈 Delete TITLE ROBERT E. WHITE NAME STERK, ANTHONY H NAME STREET ADDRESS STREET ADDRESS 904 PALM TR 33462-6103 CITY-ST-ZIP CITY-ST-ZIP LANTANA FL **DELRAY BEACH FL 33483** Delete TITLE TITLE NAME SILKEN, HOWARD STREET ADDRESS STREET ADDRESS 5600 FOREST OAKS TERR CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL 33484 ☐ Change ■ Addition TITLE Delete TITLE NAME NAME SHILLING, ARTHUR STREET ADDRESS STREET ADDRESS 818 CHUKKIER ROAD CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.

09/12/00

(561) 533-6848

Daytime Phone #