## 2001 UNIFORM BUSINESS REPORT (UBR)

## Feb 26, 2001 8:00 am DOCUMENT # N94000004772 **Secretary of State** 1. Entity Name TRAUMA FOUNDATION OF THE PALM BEACHES, INC. 02-26-2001 90555 047 \*\*\*\*61.25 Principal Place of Business Mailing Address 324 DATURA STREET, SUITE 401 324 DATURA STREET, SUITE 401 **7 6 6 7 9 9** 7 WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0541467 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) COLEMAN, IRA J ESQ % MCDERMOTT, WILL & EMERY 201 S. BISCAYNE BLVD., STE. 2200 Zip Code City **MIAMI FL 33131** 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 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Payable to Trust Fund Contribution. Department of State FEE IS \$61.25 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. ☐ Change TITLE X Delete TITLE Addition Addition Dennis Gallon PORTER, SCOTT L NAME NAME 593 Masters Way STREET ADDRESS STREET ADDRESS 324 DATURA ST. #401 West Palm Beach, FL 33418 CITY-ST-7(P CITY-ST-7IP WEST PALM BEACH FL 33401 Addition TITLE Delete TITLE Change Gary R. Nikolits OSTROW, HAROLD NAME NAME 3162 El Camino Real STREET ADDRESS STREET ADDRESS 324 DATURA ST, #401 West Palm Beach, FL 33409 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 Addition TITLE ☐ Delete Change TITLE David Goodlett SCHENCK, KENNETH N NAME NAME 330 Clematis Street #207 STREET ADDRESS STREET ADDRESS 324 DATURA ST #401 West Palm Beach, FL 33401 CITY-ST-ZIP CITY-ST-ZIP W PALM BEACH FL TITLE TITLE 💢 Delete ☐ Change Addition Stanley Pierce HEALY, EDWARD REP NAME 7412 Mandarin Drive STREET ADDRESS STREET ADDRESS 324 DATURA ST. #401 Boca Raton, FL 33433 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 B 2 ☐ Delete Change Addition MALECKI, JEAN M DR. NAME NAME STREET ADDRESS STREET ADDRESS 324 DATURA ST. #401 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 TITLE Delete Delete TITLE Change ☐ Addition ANDERSON, ARTHUR P NAME NAME 6117 OLD COURT RD, #326 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33434**

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

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KENNETH N.

SCHENCK Date

Daytime Phone #