2001 UNIFORM BUSINESS REPORT (UBR)

Feb 28, 2001 8:00 am Secretary of State **DOCUMENT # N24559** 1. Entity Name 2-28-2001 90013 005 ****61.25 BRAILLE CLUB OF PALM BEACH COUNTY, INC. Principal Place of Business Mailing Address 4801 SOUTH DIXIE 4801 SOUTH DIXIE WEST PALM BEACH FL 33405 WEST PALM BEACH FL 33405 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2484799 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 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) SORGINI, ROBERT 300 N. FEDERAL HWY. SUITE 3 Zip Code LAKE WORTH FL 33460 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 Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees **Department of State** 2 MODDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. BERNICE ISANCS CR2E037 (10/00) D Delete TITLE Change Addition TITLE DIETZ, BETTY NAME NAME 219 PINE HOYCIR BI STREET ADDRESS 417 BARNETT STREET STREET ADDRESS GREEN ACKES FL 33467 CITY-ST-ZIP WEST PALM BEACH FL 33405 CITY-ST-ZIP Change Addition TITLE ☐ Delete DILE JUDSON TITTLE RAUTER, RICHARD NAME NAME 920 11th AVE N STREET ADDRESS 13025 MEADON BREEZE DR STREET ADDRESS LAKE WORTH FL 33460 CITY-ST-ZIP WELLINGTON FL 33409 CITY-ST-ZIP ☐ Delete Addition TITLE ☐ Change CONNIE ASLAM TITLE PRESTON, ALLEN NAME 1311 N. FEBBURL HWY APT NAME STREET ADDRESS 942 CHERRY RD STREET ADDRESS LAKE WORTH, FL 33460 CITY-ST-ZIP W PALM BEACH FL 33409 CITY-ST-ZIP VPD Change ☐ Delete TITLE ☐ Addition TITLE BETTY DIETZ CHAPMAN, TILLIE NAME NAME 417 BARNETT ST STREET ADDRESS 4356 BROADWAY STREET STREET ADDRESS W. PALM BEACH FL 33405 CITY-ST-ZIP LAKE WORTH FL 33461 CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE ALLMAN, DOROTHY NAME ALLMAN, DOROTHY NAME 1500 LUCERNE AVE APT 716 1500 LUCERNE AVE APT 716 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE WORTH FL 33460 CITY-ST-ZIP LAKE WORTH FL 33460 Delete Addition ☐ Change TITI F TITLE GOODELL, MARY WALTER DIETZ NAME 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 an address, with all other like empowered.

STREET ADDRESS

CITY-SY-ZIP

allman

805 BEECH RD

W PALM BCH FL 33409

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOROTHY ALLMAN 2/22/01 PRESIDENT Date

417 BARKETT ST

W. PALM BEICH IEL 33405

FILED