

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90200 047 ****61.25

DOCUMENT # P31938

1. Entity Name
AMERICA3 FOUNDATION INC.



Principal Place of Business

**1601 FORUM PLACE
SUITE P-2
W PALM BEACH FL 33401
US**

Mailing Address

**1601 FORUM PLACE
SUITE P-2
W PALM BEACH FL 33401
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0212651**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC
1201 HAYES ST
SUITE 105
TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

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
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	C	<input type="checkbox"/> Delete
NAME	KOCH, WILLIAM, I	
STREET ADDRESS	1601 FORUM PLACE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	VPC	<input type="checkbox"/> Delete
NAME	SMITH, MICHAEL J	
STREET ADDRESS	1601 FORUM PLACE	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	SD	<input type="checkbox"/> Delete
NAME	CALLAHAN, RICHARD P.	
STREET ADDRESS	1601 FORUM PLACE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	TP	<input type="checkbox"/> Delete
NAME	ROBINSON, BRAD	
STREET ADDRESS	1601 FORUM PLACE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	ROSOW, DAVID A	
STREET ADDRESS	1667 OLD POST RD.	
CITY-ST-ZIP	SOUTHPORT CT 06490	
TITLE	VP	<input type="checkbox"/> Delete
NAME	SHIPLEY, ZACHARY	
STREET ADDRESS	1601 FORUM PLACE	
CITY-ST-ZIP	WEST PALM BCH. FL 33401	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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: Richard P. Callahan SIGNATURE REQUIRED

2/6/03

(561) 697-4300

CR2E037 (10/02)