

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 18, 2002 8:00 am
Secretary of State

03-18-2002 90015 022 ****61.25

DOCUMENT # 701206

1. Entity Name

UNITY IN THE PINES, INC.

Principal Place of Business

6073 SUMMIT BLVD.
W PALM BCH. FL 33415-3544
US

Mailing Address

6073 SUMMIT BLVD.
W PALM BCH. FL 33415-3544
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-0932859

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STONE, DALE R
4500 BELVEDERE RD
STE F2
WEST PALM BEACH FL 33415-1357

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.

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
Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME STONE, DALE R
STREET ADDRESS 4500 BEVEDERE RD STE F2
CITY-ST-ZIP WEST PALM BEACH FL 33415-1357

TITLE VP ☒ Delete
NAME GREEN, SHARON
STREET ADDRESS 11351 SUNSET BLVD
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE D ☐ Delete
NAME HARTFORD, LOUISE
STREET ADDRESS 135 SOUTHAMPTON #B
CITY-ST-ZIP WEST PALM BEACH FL 33415

TITLE Treasurer ☐ Delete
NAME HUNSINGER, LOUISE
STREET ADDRESS 1530 N. M ST.
CITY-ST-ZIP LAKE WORTH FL

TITLE D ☐ Delete
NAME ROEDEL, MARIAN
STREET ADDRESS 790 LORI DR #264
CITY-ST-ZIP LAKE WORTH FL 33461

TITLE S ☐ Delete
NAME ALEXANDER, GLORIA
STREET ADDRESS 95 CAMDEN E
CITY-ST-ZIP WEST PALM BEACH FL 33417

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V.P. ☒ Change ☒ Addition
NAME BLADES, PENELOPE
STREET ADDRESS 10891 Acme Rd
CITY-ST-ZIP West Palm Beach FL 33414

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TREASURER ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

[Signature]
SIGNATURE REQUIRED

3/3/2002

561-478-5454

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)