

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 17, 2004 8:00 am
Secretary of State

02-17-2004 90038 027 ****61.25

DOCUMENT # 704556

1. Entity Name

DEBBIE-RAND MEMORIAL SERVICE LEAGUE, INC.



Principal Place of Business

800 MEADOWS RD.
BOCA RATON FL 33486-2304

Mailing Address

800 MEADOWS RD.
BOCA RATON FL 33486-2304

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-1055553

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPRINKLE, PHILLIP M., ESQ.
800 MEADOWS ROAD
BOCA RATON FL 33486

7. Name and Address of New Registered Agent

Name

PAUL RISNER

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

V-PRES. & GENERAL COUNSEL

800 MEADOWS ROAD

City

Boca Raton

FL

Zip Code

33486

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
Due By May 1, 2004

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 ☒ V
NAME FOX, BARBARA ☐ Delete
STREET ADDRESS 7383 ORANGEWOOD LN 304
CITY-ST-ZIP BOCA RATON FL 33433

TITLE ☒ T
NAME GOLDBERG, GERRY ☒ Delete
STREET ADDRESS 19490 BAYVIEW RD
CITY-ST-ZIP BOCA RATON FL 33434

TITLE ☒ T
NAME MERTZ, MARGE ☒ Delete
STREET ADDRESS 17263 BOCA CLUB BLVD APT # 2
CITY-ST-ZIP BOCA RATON FL 33487

TITLE ☐ D
NAME ULFERTS, JOSEPHINE ☐ Delete
STREET ADDRESS 625 SW CANISTEL LANE
CITY-ST-ZIP BOCA RATON FL 33486

TITLE ☐ AT
NAME KULBERG, WENDY ☐ Delete
STREET ADDRESS 2401 N. OCEAN BLVD
CITY-ST-ZIP BOCA RATON FL 33431

TITLE ☐ V
NAME SMITH, PHYLLIS ☐ Delete
STREET ADDRESS 890 LICALAC DRIVE
CITY-ST-ZIP BOCA RATON FL 33487

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ P
NAME PAT THOMAS ☐ Change ☒ Addition
STREET ADDRESS 800 MEADOWS RD
CITY-ST-ZIP BOCA RATON, FL 33486

TITLE ☒ V
NAME DORCAS EPPRIGHT ☐ Change ☒ Addition
STREET ADDRESS 800 MEADOWS RD
CITY-ST-ZIP BOCA RATON, FL 33486

TITLE ☒ T
NAME NANCY QUICK ☐ Change ☒ Addition
STREET ADDRESS 800 MEADOWS RD
CITY-ST-ZIP BOCA RATON, FL 33486

TITLE ☒ S
NAME DORENE HIGIER ☐ Change ☒ Addition
STREET ADDRESS 800 MEADOWS RD
CITY-ST-ZIP BOCA RATON, FL 33486

TITLE ☒ D
NAME JOHN SWEENEY ☐ Change ☒ Addition
STREET ADDRESS 800 MEADOWS RD
CITY-ST-ZIP BOCA RATON, FL 33486

TITLE ☒ D
NAME ARTHUR DERMER ☐ Change ☒ Addition
STREET ADDRESS 800 MEADOWS RD
CITY-ST-ZIP BOCA RATON, FL 33486

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: *Patricia Thomas* President 2/5/04 (561) 955-4098
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

D

☒ ADDITION

Attachment
#704556
94016024

HENRY HOLMES
800 MEADOWS RD
BOCA RATON, FL 33486