

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 708014

1. Entity Name

COLUMBIAN BUILDING ASSOCIATION OF WEST PALM BEACH, INC.

Principal Place of Business

1155 S CONGRESS AVE
P.O. BOX 1382
WEST PALM BCH FL 33406
US

Mailing Address

P.O. BOX 21584
WEST PALM BEACH FL 33416
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

59-1466100

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

YEAGER, THOMAS
2250 PALM BEACH LAKES BLVD.
WEST PALM BEACH FL 33409

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ~~DVD~~ ☒ Delete
NAME ~~SERRAES, EUGENE E~~
STREET ADDRESS ~~500 XANADOUGENE E~~
CITY-ST-ZIP ~~JUPITER FL 33477~~

TITLE ~~SD~~ ☒ Change ☒ Addition
NAME ROBERT CHASSE
STREET ADDRESS 2547 MEADOW COURT
CITY-ST-ZIP W. PALM BEACH, FL 33406

TITLE PD ☐ Delete
NAME SERRAES, MARTIN
STREET ADDRESS 5137 EL CLARO CIRCLE
CITY-ST-ZIP WEST PALM BEACH FL 33415

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

TITLE D ☐ Delete
NAME ARCENTALES, EDWARD
STREET ADDRESS 205 AVILA ROAD
CITY-ST-ZIP WEST PALM BEACH FL 33405

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

TITLE ~~SD~~ ☒ Delete
NAME ~~FISCHER, MICHAEL E~~
STREET ADDRESS ~~2020 CHEROKEE RD~~
CITY-ST-ZIP ~~WEST PALM BCH FL 33406~~

TITLE ~~VD~~ ☒ Change ☒ Addition
NAME SHEPARD, KEELER
STREET ADDRESS 7 W. ARCH DRIVE
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE TD ☐ Delete
NAME HARTMAN, ROME
STREET ADDRESS 2405 S FLAGLER DR
CITY-ST-ZIP WEST PALM BEACH FL 33401

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

TITLE ☐ Delete
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:

Thomas Yeager
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/01 561-641-5211
Date Daytime Phone #

CR2E037 (10/00)