

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 30 AM 9:49

DOCUMENT # 709692 (8)

1. Corporation Name

PALM BEACH COUNTY CHAPTER OF THE SOCIETY FOR THE
PRESERVATION AND ENCOURAGEMENT OF BARBER SHOP Q

Principal Place of Business

Mailing Address

2393 SW 13TH AVENUE
BOYNTON BEACH FL 33426
US

2393 SW 13TH AVENUE
BOYNTON BEACH FL 33426
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/04/1965

3a. Date of Last Report

01/24/1994

4. FEI Number

59-6152340

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒ \$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STEWART, WILLIAM J.
2393 SW 13TH AVENUE
BOYNTON BEACH FL 33426

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reconstituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	DELORENZO, LARRY
STREET ADDRESS	2717 27TH COURT
CITY-ST-ZIP	JUPITER FL
TITLE	VD
NAME	PRINCE, BRUCE
STREET ADDRESS	5081 THYME DRIVE
CITY-ST-ZIP	PALM BEACH GARDENS FL
TITLE	VD
NAME	PAGLIARULO, FRANK
STREET ADDRESS	7391 LANGSTON COURT
CITY-ST-ZIP	LAKE WORTH FL
TITLE	V
NAME	ALIPOULIOS, STEVE
STREET ADDRESS	8157 PINE TREE LANE
CITY-ST-ZIP	W.PALM BCH. FL
TITLE	S
NAME	STEWART, WILLIAM J.
STREET ADDRESS	2393 SW 13TH AVENUE
CITY-ST-ZIP	BOYNTON BEACH FL
TITLE	T
NAME	MOE, ROD
STREET ADDRESS	2714 STARWOOD COURT
CITY-ST-ZIP	WEST PALM BEACH FL

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	VD
2.2 NAME	Lonsway, James
2.3 STREET ADDRESS	14759 Hideaway Lake Lane
2.4 CITY-ST-ZIP	Delray Beach, FL
3.1 TITLE	VD
3.2 NAME	Greenberg, Jerry D.
3.3 STREET ADDRESS	3146 Via Poinciana, Apt. 105
3.4 CITY-ST-ZIP	Lake Worth, FL
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☒ Change ☐ Addition
6.2 NAME	Weir, Edwin R.
6.3 STREET ADDRESS	4240 N. Palm Forest Drive
6.4 CITY-ST-ZIP	Delray Beach, FL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

William J. Stewart

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILE

Daytime Phone #

1/15/95 (407) 737-3426