

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 03, 2002 8:00 am
Secretary of State

06-03-2002 91187 008 ****61.25

DOCUMENT # 709692

1. Entity Name

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

Principal Place of Business

Mailing Address

2419 NW 30TH ROAD
 BOCA RATON FL 33431
 US

2419 NW 30TH ROAD
 BOCA RATON FL 33431
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-6152340

Applied For

Not Applicable

Zip

Country

Zip

Country

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

FERGUSON, DANNY L
2419 NW 30TH ROAD
BOCA RATON FL 33431

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 ☐ Delete
 NAME **DV**
 STREET ADDRESS **ZORKOW, LEO**
 CITY-ST-ZIP **131 HAMMOCKS CT**
WEST PALM BEACH FL 33413-2038

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

TITLE ☐ Delete
 NAME **DP**
 STREET ADDRESS **GREIM, GEORGE**
 CITY-ST-ZIP **404 TROTTERS LANE**
WEST PALM BEACH FL 33413

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

TITLE ☐ Delete
 NAME **ALIAPOULIOS, STEVE**
 STREET ADDRESS **8157 PINE TREE LANE**
 CITY-ST-ZIP **W.PALM BCH. FL**

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

TITLE ☒ Delete
 NAME **T.**
 STREET ADDRESS **REEVES, RONALD**
 CITY-ST-ZIP **9485 EL CLAIR RANCH RD**
BOYNTON BEACH FL 33437-3341

TITLE ☐ Change ☒ Addition
 NAME **D/T**
 STREET ADDRESS **JAMES WATSON**
 CITY-ST-ZIP **129 HAMMOCKS COURT**
WEST PALM BEACH, FL 33413

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

George R. Greim
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/02 (561) 433-3359

CR2E037 (9/01)