

2000 UNIFORM BUSINESS REPORT (UBR)

3/

DOCUMENT # 711783

1. Entity Name

SAFETY COUNCIL OF PALM BEACH COUNTY, INC.

FILED
May 11, 2000 8:00 am
Secretary of State

03-03-2000 90020 015 *****70.00

Principal Place of Business

770 SOUTH MILITARY TRAIL
W PALM BCH, FL 33415

Mailing Address

770 SOUTH MILITARY TRAIL
W PALM BCH FL 33415-3906

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

59-1168121

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

SCHULTETUS, TREFT
4772 PINEAIRE LANE
WEST PALM BEACH FL 33417

7. Name and Address of New Registered Agent

Name
MR. JOHN WILLIAMS
Street Address (P.O. Box Number is Not Acceptable)
SOLID WASTE AUTHORITY
7501 NORTH JOG ROAD
City
WEST PALM BCH FL Zip Code
33412

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

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

Treasurer

4/3/2000
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	P	☒ Delete
NAME	HICKS, BILLY	
STREET ADDRESS	2500 JUPITER PARK DRIVE	
CITY-ST-ZIP	JUPITER FL	
TITLE	VP	☐ Delete
NAME	LUX, HARRY	
STREET ADDRESS	821 AVENUE E	
CITY-ST-ZIP	RIVIERA BEACH FL 33404	
TITLE	XX	☐ Delete
NAME	HAWKINS, WILFRED	
STREET ADDRESS	100 E BOYNTON BEACH BLVD	
CITY-ST-ZIP	BOYNTON BEACH FL 33425	
TITLE	TD	☒ Delete
NAME	SCHULTETUS, TREFT	
STREET ADDRESS	4772 PINEAIRE LANE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	VPD	☐ Delete
NAME	BURROWS, TONI A	
STREET ADDRESS	770 S MILITARY TRAIL	
CITY-ST-ZIP	W PALM BEACH FL 33415	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P	☒ Change ☐ Addition
NAME	LUX, HARRY	
STREET ADDRESS	821 AVENUE E	
CITY-ST-ZIP	RIVIERA BEACH, FL 33404	
TITLE	VP D	☒ Change ☐ Addition
NAME	HAWKINS, WILFRED	
STREET ADDRESS	100 E BOYNTON BEACH BLVD	
CITY-ST-ZIP	BOYNTON BEACH, FL 33425	
TITLE	SD	☐ Change ☒ Addition
NAME	STORCK, TERRY	
STREET ADDRESS	6500 CONGRESS AVENUE	
CITY-ST-ZIP	BOCA RATON, FL 33487	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TD	☐ Change ☒ Addition
NAME	WILLIAMS, JOHN	
STREET ADDRESS	7501 NORTH JOG ROAD	
CITY-ST-ZIP	WEST PALM BEACH, FL 33412	

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:

John C. Williams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-21-2000

561-689-4733

Date

Daytime Phone #

CR2E037 (9/99)