

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 718206

1. Entity Name

FOUNDATION FOR THE SUPPORT OF MARINE YOUTH ACTIV

FILED

May 10, 2001 8:00 am
Secretary of State

05-10-2001 90087 012 ****61.25

Principal Place of Business
7677 COURTYARD RUN WEST
BOCA RATON FL 33433
US

Mailing Address
7677 COURTYARD RUN WEST
BOCA RATON FL 33433
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

23-7115524

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

7. Name and Address of New Registered Agent

LEASOR, JOHN E
726 SOUTH LAKE AVENUE
DELRAY BEACH, FL 33483

Name ROBERT WORTHMAN

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

7677 COURTYARD RUN W

City Boca Raton

FL

Zip Code 33433

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

Robert J. Worthman

ROBERT J. WORTHMAN

4/20/01

DATE

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

(NOTE: Registered Agent signature required when reinstating)

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 D
NAME WORTHMAN, ROBERT
STREET ADDRESS 7677 COURTYARD RUN WEST
CITY-ST-ZIP BOCA RATON FL

☐ Delete

TITLE DT
NAME
STREET ADDRESS
CITY-ST-ZIP

☒ Change ☐ Addition

TITLE D
NAME DURCOCHER, DAVID
STREET ADDRESS 6844 PALMETTO CIRCLE, SOUTH 203
CITY-ST-ZIP BOCA RATON FL 33433

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE TD
NAME LEASOR, JOHN
STREET ADDRESS 726 SOUTH LAKE AVENUE
CITY-ST-ZIP DELRAY BEACH FL

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☒ Change ☐ Addition

TITLE PD
NAME MROZ, RICK
STREET ADDRESS 4401 NW 3RD AVE
CITY-ST-ZIP BOCA RATON FL 33431

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VD
NAME BOWES, BILL
STREET ADDRESS 6503 AMBERWOOD DR
CITY-ST-ZIP BOCA RATON FL 33433

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE SD
NAME HAINS, DREW
STREET ADDRESS 2059 SW 15TH ST., APT #227
CITY-ST-ZIP DEERFIELD BEACH FL 33442

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

Robert J. Worthman
ROBERT J. WORTHMAN

4/20/01

954-349-4240

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)