

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 20, 2002 8:00 am
Secretary of State

05-20-2002 90305 009 ****61.25

DOCUMENT # 718794

1. Entity Name

NELLE SMITH RESIDENCE FOR GIRLS, INC.

Principal Place of Business

Mailing Address

P.O. BOX 910
 WEST PALM BEACH FL 33402
 US

P.O. BOX 910
 WEST PALM BEACH FL 33402
 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 **59-1313197**

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

ARPE, MARY C
ONE CLEARLAKE CENTRE, 250 SOUTH AUSTRALIAN
1010
WEST PALM BEACH FL 33401

Name
Michelle Huhn
 Street Address (P.O. Box Number is Not Acceptable)
408 Gulf Road
 City **North Palm Beach** **FL** Zip Code **33408**

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 *Michelle C Huhn*
 Signature, typed or printed name of registered agent and title if applicable.

April 28, 2002
 DATE

(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	<input type="checkbox"/> Delete
NAME	SMITH, D. CULVER III	
STREET ADDRESS	625 NORTH FLAGLER DRIVE, SUITE 700	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	D	<input type="checkbox"/> Delete
NAME	BUSH, EDITH	
STREET ADDRESS	1444 EIGHTH STREET	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	VD	<input type="checkbox"/> Delete
NAME	SICILIANO-HARTT, SARAH DR	
STREET ADDRESS	1050 N.W. 15TH STREET, #111A	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	D	<input type="checkbox"/> Delete
NAME	NEALY, JOHN	
STREET ADDRESS	1560 6TH STREET	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	DD D	Change <input type="checkbox"/> Delete <input type="checkbox"/>
NAME	ARPE, MARY C	
STREET ADDRESS	250 S. AUSTRALIAN AVEN., #1010	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	SD	<input type="checkbox"/> Delete
NAME	BOYLE, EILEEN	
STREET ADDRESS	2600 QUANTAM BLVD.	
CITY-ST-ZIP	BOYNTON BEACH FL 33426	

TITLE	PD President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Michelle Huhn	
STREET ADDRESS	408 Gulf Road	
CITY-ST-ZIP	North Palm Beach, FL 33408	
TITLE	TD Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Margaret Faichney	
STREET ADDRESS	11380 Prosperity Farms Rd #112	
CITY-ST-ZIP	Palm Beach Gardens, FL 33410	
TITLE	D Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gigi Tylander	
STREET ADDRESS	225 So. County Road	
CITY-ST-ZIP	Palm Beach, FL 33480	
TITLE	D Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mary Kay Murray	
STREET ADDRESS	1707 No. Lakeside Drive	
CITY-ST-ZIP	Lake Worth, FL 33460	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Michelle Huhn*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 28, 2002 **561-355-7597**
 Date Daytime Phone #

CR2E037 (9/01)