2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 722335

1. Entity Name

PLANNED PARENTHOOD OF THE PALM BEACH AND TREASUR

Principal Place of Business Mailing Address 5312 BROADWAY 5312 BROADWAY WEST PALM BEACH FL 33407 WEST PALM BEACH FL 33407-2704

FILED May 02, 2000 8:00 am Secretary of State 05-02-2000 90117 042 ****70.00

2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS S	PACE		
City & State		City & State		4. FEI Numb	er 59-1391115	_ 	lied For Applicable	
Zip	Country	Zip	Country	5. Certificate		8.75 Addi		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
			Name	Name				
			Stroat A	Street Address (P.O. Box Number is Not Acceptable)				
COOPER, MARGARET			ollect Address (1.5. Box National of Not Address of					
505 S. FLAGER DR.			,					
STE 1100			City	-		Zip Code		
PALM BEACH FL 33480					FL_			
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								
Organization, tylen or brillings tradition addition and the state and th								
				45.00	Make Charle D	lovoblo to		
FILE NOW: 9. Election Campaign Fit Trust Fund Contributio			· -	\$5.00 May Be Make Check Payable to Added to Fees Department of State				
FEE IS \$61.25				Added to Fees	Department	UI State		
10. OFFICERS AND DIRECTORS				ADDITIONS/CH	IANGES TO OFFICERS AND DIR	ECTORS IN	10	
TITLE	VD	☐ Delete	TITLE	VD		Change	Addition &	
NAME	CURTIS, CHRISTINE		NAME	CURTIS, CI	HRISTINE	•	[9	
STREET ADDRESS	720 S OCEAN BLVD		STREET ADDRESS	CURTIS, CI	DADWAY	30.4.5		
CITY-ST-ZIP	PALM BEACH FL 33480		CITY-ST-ZIP	WEST PAUL	1 BEACH FL.	33407		
TITLE	SD	☐ Delete	TITLE	SD LEADING	AZ ZĪAZĀŽ	C hange	☐ Addition C	
NAME	ELLINGTON, CHARLIE L		NAME	APPLEMA		•	1	
STREET ADDRESS -	-1510 6TH ST	-	STREET ADDRESS	227 DK	OADWAY	3340	2	
CITY-ST-ZIP	W. PALM BCH FL 33401		CITY-ST-ZIP		LM BEACH, FL			
TITLE	PD	☐ Delete	TITLE	CD		K Change	☐ Addition	
NAME	BROWN, CYNTHIA		NAME	BROWN, C				
STREET ADDRESS CITY-ST-ZIP	1744 S OCEAN BLVD		STREET ADDRESS CITY-ST-ZIP	WEST PA	ADWAY	231/0	7	
	SEWALL'S POINT FL 33480			WEST PAI	LM BEACH, I'L	MChanna	Addition	
TITLE NAME	VD ATKIN, NANCY	☐ Delete	TITLE NAME	MOTENHOL	MARY	Change		
STREET ADDRESS	13536 VERDEDR		STREET ADDRESS	53/2 BR	DANWAY			
CITY-ST-ZIP	PALM BCH GRDNS FL 33410		CITY-ST-ZIP	WEST PA	LH BEACH FL	3340	7	
TITLE	TD		TITLE	TD		Change	Addition	
NAME	FELDMAN, HOWARD	<u> </u>	NAME	MEVEDS	AMES	•	_	
STREET ADDRESS				SBA BR	DADWAY			
CITY-ST-ZIP	W PALM BCH FL 3341		CITY-ST-ZIP	WEST PAL	M BEACH FL	33404		
TITLE	VD	☐ Delete	TITLE	3	,	K Change	Addition	
NAME	MINTMIRE, PATRICIA R		NAME	MINTMIRE	PATRICIA			
STREET ADDRESS	124 EL MIRASOL		STREET ADDRESS	CAN KEN	ADWAY	ココルク		
CITY-ST-ZIP	PALM BEACH FL		CITY-ST-ZIP	WEST PAL	M BEACH, FL	13401		

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 eath; 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.