

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 02, 2002 8:00 am**  
**Secretary of State**

05-28-2002 91718 010 \*\*\*\*61.25

DOCUMENT # 722545

1. Entity Name

FLORIDA HISTORY CENTER & MUSEUM, INC.

LOXAHATCHEE RIVER HISTORICAL SOCIETY, Inc

Principal Place of Business

Mailing Address

15 N. U.S. HWY. ONE  
 PETER, FL 33477-3213

805 N. U.S. HWY. ONE  
 JUPITER FL 33477-3213  
 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

23-7448343

Applied For

Not Applicable

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

DUBOIS, JOHN  
 931 VILLAGE BLVD.  
 #905-447  
 WEST PALM BEACH FL 33409

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

TITLE 1VPD ☒ Delete  
 NAME BOYD, ROBERT  
 STREET ADDRESS 18101 SE FAIRVIEW CIRCLE  
 CITY-ST-ZIP TEQUESTA FL 33469

TITLE 2VPD ☒ Delete  
 NAME COMPARE, PAUL  
 STREET ADDRESS 220 VENUS ST., SUITE 7  
 CITY-ST-ZIP JUPITER FL 33438

TITLE TD ☒ Delete  
 NAME NOEL, DONALD  
 STREET ADDRESS 14148 US HWY 1  
 CITY-ST-ZIP JUNO BEACH FL 33408

TITLE PD ☐ Delete  
 NAME DUBOIS, JOHN  
 STREET ADDRESS 931 VILLAGE BLVD., #905-447  
 CITY-ST-ZIP WEST PALM BEACH FL 33409

TITLE S ☐ Delete  
 NAME KULANAS, JOSEPH  
 STREET ADDRESS 5540 NORTH OCEAN DRIVE  
 CITY-ST-ZIP RIVIERA BEACH FL 33404

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Vice President ☐ Change ☒ Addition  
 NAME Roger Phelps  
 STREET ADDRESS 4161 S. U.S. Hwy. #1, #1-K2  
 CITY-ST-ZIP Jupiter, FL 33477

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

TITLE Treasurer ☐ Change ☒ Addition  
 NAME Erin Ganter  
 STREET ADDRESS 211 Green Point Circle  
 CITY-ST-ZIP Palm Beach Gardens, FL 33418

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

TITLE ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS 5540 North Ocean Drive  
 CITY-ST-ZIP Riviera Beach, FL 33404

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:

Signature and Typed or Printed Name of Signing Officer or Director

04/19/02 561-747-6639

Date

Daytime Phone #

CR2E037 (9/01)