

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2001 8:00 am
Secretary of State

08-21-2001 90005 023 ****70.00

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DOCUMENT # 723887

1. Entity Name

COMPREHENSIVE ALCOHOLISM REHABILITATION PROGRAMS

(1A)

Principal Place of Business

Mailing Address

5400 EAST AVE
W. PALM BEACH FL 33407
US

P.O. BOX 2507
WEST PALM BEACH FL 33407 33402
US

00001000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

33402

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1447364

Applied For

Not Applicable

Zip

Country

Zip

Country

33402

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

SUSI, SAMUEL E
1900 GLADES ROAD
STE 200
BOCA RATON FL 33431

JOHN D. KURTZ
388 S. MILITARY TRAIL
WEST PALM BEACH, FL
33415

Name

JOHN D. KURTZ

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

388 S. MILITARY TRAIL

City

WEST PALM BEACH

FL

Zip Code

33415

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

8/17/01

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

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 NAME STREET ADDRESS CITY-ST-ZIP	P NEEDLE, ROBERT 5201 VILLAGE BLVD WEST PALM BEACH FL 33407	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JORDAN, LUTHER 1496 32ND STREET RIVIERA BEACH FL 33404	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MILLER, PARK 2090 PALM BCH LAKES BLVD 200 WEST PALM BEACH FL 33409	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILLIAMS, SCOTT 250 AUSTRALIAN AVE SOUTH WEST PALM BEACH FL 33401	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KINSEY, CASSANDRA P 2927 EMBASSY DRIVE WEST PALM BEACH FL 33401	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O OCONNER, LOIS 224 VALENCIA BLVD WEST PALM BEACH FL 33401	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary ORLOVSKY, Donald 1601 Belvedere Rd., Ste. 402 West Palm Beach, FL 33406	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer CARPENTER, Peggy 303 Banyan Blvd., First Union Bank West Palm Beach, FL 33401	☐ 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)(f), 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] 8/18/01 (561) 894-6400

CR2E037 (5/01)