2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 732329 1. Entity Name

2002 U DOCUME 1. Entity Name	\neg M	FILED May 06, 2002 8:00 am Secretary of State					
PALM BEACH	1 - LEISUREVILLE CHAPT NATION OF RETIRED PER	TER #2086 OF AMERI ISONS, INC.			05-06-2002 90		
Principal Place of B	usiness	Mailing Address					
113 SW 8TH PL BOYTON BEACH FL 33426 US		113 SW 8TH PL BOYNTON BEACH FL 33426 US					
2. Principal Place of Business		3. Mailing Address SAME					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN	THIS SPACE	
City & State		City & State		4. FEI Number	4. FEI Number Applied For Not Applicable		
Zip Country		Zip Country		5. Certificate of St		\$9.75 ***	litional
6.	Name and Address of Current	Registered Agent		7. Name and Add	ress of New Regist		<u> </u>
			Name	GLORIA	CONN	ELL	
SIGKER-MARY		Street Add	dress (P.O. Box Number is	Not Acceptable)		=	
113 SW 8TH PLACE				317 SW	LAKE (OURT	
BOYNTON BEA	CH FL 33426			9CH	FL Zip Cod	3426	
8. The above name	ed entity submits this statement fo	r the purpose of changing its r	egistered office or r	registered agent, or both, in			746
			λ.	۸۱			
SIGNATURE (2)	ORIA CONKE	h (llouis	lumo L		H-J3	2-05	
Signat	ure, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signature	e required when reinstating)		DATE	
FILE NOW: FEE IS \$61.25 9. Election Campa Trust Fund Con				\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIF	RECTORS	11.	ADDITIONS/CHANG			
TITLE CD COS	STELLO, ELEANOR	Delete	TITLE D	PRESMEI NORMA VI	AN 1303K	CAC Change	☐ Addition ☐
STREET ADDRESS 200	3 SW GOLF LANE		STREET ADDRESS	3386 SW 1 BOYNTON TREASURE	ATH AVE	E. 221	126
100	INTON BEACH FL	5	CITY-ST-ZIP	BOYNTON .	DEACN, I	Channe	Addition S
TITLE PD	AVOLA, CAROL	Delete	■ NAME	(74 <i>01411</i> 1 6 6			
STREET ADDRESS 131	4 SW 15TH ST		STREET ADDRESS	1317 BW L	AKE CT	. 354	4
UD.	INTON BEACH FL 33426		CITY-ST-ZIP	1317 BW LIBOYN TON DIRECTOR MARY L-IRI	- Camm	TEN Channe	Addition
TITLE VD	DEN-CAROL	☐ Delete	TITLE	MARY L-IRI	CKER	- Containgo	
STREET ADDRESS 170	5 SW 8TH ST		STREET ADDRESS City-St-Zip	113 SW 8 BOYNTON B	TH PL	93421	:
TITLE SD	/NTON BEACH FL 33426	☐ Delete	TITLE	1907147014 C	<u> </u>	☐ Change	Addition
NAME DIX	ON, JANET		NAME				
	SW 18TH COURT (NTON BEACH FL		STREET ADDRESS CITY-ST-ZIP				
TITLE TD	HITOT DECOTTE	⊠ Delete	TITLE		.=	☐ Change	Addition
NAME RIC	KER, MARY L	•	NAME				-
	SW 8TH PLACE INTON BEACH FL		SŤREET ADDRESS CITY-ST-ZIP				{
TITLE CD	INTON DEAGN FL	Delete	TITLE		<u> </u>	☐ Change	Addition
NAME VAN	IBUSKIRK, NORMA	<u> </u>	NAME				}
STREET ADDRESS 238	6 SW 14TH AVENUE		STREET ADDRESS CITY-ST-ZIP				-
CITY-ST-ZIP BOY	INTON BEACH FL 33426		Ulit-SI-ZIF				

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.