

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 736186

1. Entity Name

THE AMERICAN LANGUAGE RESEARCH FOUNDATION, INC.

Principal Place of Business

Mailing Address

2100 SPRINGDALE BLVD. - Y216
PALM SPRINGS FL 33461-8546

2100 SPRINGDALE BLVD. - Y216
PALM SPRINGS FL 33461-6366

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

59-1724108

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

WILSON, WILLIAM J.
2100 SPRINGDALE BLVD. #Y216
PALM SPRINGS FL 33461-8546

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Delete
NAME SARVER, SUSAN C.
STREET ADDRESS 1110 LANDING MEADOWS DR.
CITY-ST-ZIP HENDERSON KY

TITLE D ☒ Change ☒ Addition
NAME SUSAN C. SIENERY
STREET ADDRESS 5033 SHENANDOAH AVENUE
CITY-ST-ZIP Newburgh, Indiana 47630

TITLE ST ☐ Delete
NAME MORRISSEY, ROSALIE C.
STREET ADDRESS 1-B ATRIUM CIRCLE
CITY-ST-ZIP ATLANTIS FL

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 33462

TITLE V ☐ Delete
NAME ADAMS, FRANK
STREET ADDRESS 4113 KENT AVENUE
CITY-ST-ZIP LAKE WORTH, FL 00000

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 33461

TITLE D ☐ Delete
NAME FLORY, WILLIAM C.
STREET ADDRESS 5051 FLORY DRIVE
CITY-ST-ZIP LAKE WORTH, FL 00000

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 33460

TITLE PD ☐ Delete
NAME WILSON, WILLIAM J
STREET ADDRESS 2100 SPRINGDALE #216
CITY-ST-ZIP PALM SPRINGS FL

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 33461

TITLE D ☐ Delete
NAME MILLARD, PHIL N.
STREET ADDRESS 7189 WASHINGTON AVE.
CITY-ST-ZIP LANTANA FL

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 33462

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

April 17, 2000 (561) 967-5063

Date

Daytime Phone #

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90402 035 ****70.00

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DO NOT WRITE IN THIS SPACE