

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 736186

1. Entity Name

THE AMERICAN LANGUAGE RESEARCH FOUNDATION, INC.

Principal Place of Business

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

Mailing Address

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

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  
NAME SIENER, SUSAN C  
STREET ADDRESS 5033 SHENANDOAH AVE  
CITY-ST-ZIP NEWBURGH IN 47630 ☐ Delete

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP (CORRECTION)

TITLE ST  
NAME MORRISSEY, ROSALIE C.  
STREET ADDRESS 1-B ATRIUM CIRCLE  
CITY-ST-ZIP EUTAW AL 35462 ☐ Delete

TITLE ☒ Change ☐ Addition  
NAME ST MORRISSEY, ROSALIE C.  
STREET ADDRESS 1-B ATRIUM CIRCLE  
CITY-ST-ZIP ATLANTIS, Florida 33462

TITLE V  
NAME ADAMS, FRANK  
STREET ADDRESS 4113 KENT AVENUE  
CITY-ST-ZIP LAKE WORTH FL 33461 ☐ Delete

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

TITLE D  
NAME FLORY, WILLIAM C.  
STREET ADDRESS 5051 FLORY DRIVE  
CITY-ST-ZIP LAKE WORTH FL 33460 ☐ Delete

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

TITLE PD  
NAME WILSON, WILLIAM J  
STREET ADDRESS 2100 SPRINGDALE #216  
CITY-ST-ZIP LAKE WORTH FL 33461 ☐ Delete

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

TITLE D  
NAME MILLARD, PHIL N.  
STREET ADDRESS 7189 WASHINGTON AVE.  
CITY-ST-ZIP LAKE WORTH FL 33462 ☐ Delete

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:

*William J. Wilson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 21, 2001 (561) 967-5063

Date

Daytime Phone #

CR2E037 (10/00)

FILED  
Apr 27, 2001 8:00 am  
Secretary of State

04-27-2001 90223 019 \*\*\*\*70.00



DO NOT WRITE IN THIS SPACE