

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90338 037 ****61.25

DOCUMENT # 745192

1. Entity Name
SUNFEST OF PALM BEACH COUNTY, INC.



Principal Place of Business
**525 CLEMATIS STREET
WEST PALM BEACH FL 33401
US**

Mailing Address
**525 CLEMATIS STREET
WEST PALM BEACH FL 33401
US**

90011264



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1864355**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**MAYANS, STEVEN A
C/O FITZGERALD HAWKINS MAYANS & COOK, PA
515 NORTH FLAGLER DR SUITE 900
WEST PALM BEACH FL 33401**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **SD** ☒ Delete
NAME **JOHNSON, JOHN M**
STREET ADDRESS **176 MONTEREY WAY**
CITY-ST-ZIP **ROYAL PALM BEACH FL 33411**

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

TITLE **PD** ☐ Delete
NAME **JOHNSON, JOHN M**
STREET ADDRESS **176 MONTEREY WAY**
CITY-ST-ZIP **ROYAL PALM BEACH FL 33411**

TITLE **Past President / Director** ☒ Change ☐ Addition
NAME **John Johnson**
STREET ADDRESS **176 Monterey Way**
CITY-ST-ZIP **Royal Palm Beach, FL 33411**

TITLE **SD** ☐ Delete
NAME **SARTORY-LINK, WENDY**
STREET ADDRESS **7696 BLOD LAD ROAD**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33411**

TITLE **President / Director** ☒ Change ☐ Addition
NAME **Wendy Sartory-Link**
STREET ADDRESS **7696 Blod Lad Road**
CITY-ST-ZIP **Palm Beach Gardens, FL 33411**

TITLE **MD** ☐ Delete
NAME **JAMIESON, PAUL**
STREET ADDRESS **6720 NW 25TH WAY**
CITY-ST-ZIP **FORT LAUDERDALE FL**

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

TITLE **T** ☐ Delete
NAME **VIROSTEK, GWYNN**
STREET ADDRESS **2741 NE 8TH COURT**
CITY-ST-ZIP **POMPANO BEACH FL 33062**

TITLE **Treasurer / Director** ☒ Change ☐ Addition
NAME **Gwynn Virotek**
STREET ADDRESS **2741 NE 8th Court**
CITY-ST-ZIP **Pompano Beach, FL 33062**

TITLE **VPD** ☐ Delete
NAME **JONETHIS, TERRY**
STREET ADDRESS **1231 SINGER DRIVE**
CITY-ST-ZIP **RIVIERA BEACH FL 33408**

TITLE **Secretary / President-Elect / Director** ☒ Change ☐ Addition
NAME **Terry Jonethis**
STREET ADDRESS **1231 Singer Drive**
CITY-ST-ZIP **Riviera Beach, FL 33408**

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 REQUIRED

1-22-03

561-659-5980

CR2E037 (10/02)