

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

04-01-2002 90029 015 ****61.25

0031744

DOCUMENT # 764235

1. Entity Name

THE CHILD ADVOCACY BOARD OF PALM BEACH COUNTY, I NC.

Principal Place of Business

Mailing Address

810 DATURA STREET
 FIRST FLOOR
 WEST PALM BEACH FL 33401

810 DATURA STREET
 FIRST FLOOR
 WEST PALM BEACH FL 33401

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

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SILBER, ILENE
114 N J STREET
LAKE WORTH FL 33460

Name **SILBER, ILENE**
 Street Address (P.O. Box Number is Not Acceptable) **230 S. DIXIE HWY #200**
LAKE WORTH, FL 33460
 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

ILENE SILBER *[Signature]*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-21-02

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 **PD** ☐ Delete
 NAME **SCHMIDT, SALLY**
 STREET ADDRESS **423 FERN ST #220**
 CITY-ST-ZIP **WEST PALM BEACH FL 33401**

TITLE **VD** ☒ Delete
 NAME **SCHMIDT, SALLY**
 STREET ADDRESS **7710 S FLAGLER**
 CITY-ST-ZIP **WEST PALM BEACH FL 33405**

TITLE **SD** ☒ Delete
 NAME **BECK, CYNTHIA**
 STREET ADDRESS **2311 10TH AVE N #9**
 CITY-ST-ZIP **LAKE WORTH FL 33461**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE **VD** ☐ Change ☒ Addition
 NAME **VALERIE SILVERMAN**
 STREET ADDRESS **7710 S. FLAGLER**
 CITY-ST-ZIP **WEST PALM BEACH, FL 33405**

TITLE **SD** ☐ Change ☒ Addition
 NAME **ILENE SILBER**
 STREET ADDRESS **230 S. DIXIE HWY. #200**
 CITY-ST-ZIP **LAKE WORTH, FL 33460**

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

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

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:

[Signature]

REQUIRED

3-21-02

CR2E037 (9/01)