

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 843035

1. Entity Name

PALMER COURSE DESIGN COMPANY

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90085 019 ***150.00

Principal Place of Business

Mailing Address

IMG CENTER
SUITE 100, 1360 E 9TH ST
CLEVELAND OH 44114-782
US

IMG CENTER
SUITE 100, 1360 E 9TH ST
CLEVELAND OH 44114-1730
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

34-0896816

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEAY, EDWIN B		NAME	
STREET ADDRESS	IMG CENTER, SUITE 100, 1360 E 9TH ST		STREET ADDRESS	
CITY-ST-ZIP	CLEVELAND, OHIO 00000 44114-1782		CITY-ST-ZIP	
TITLE	T	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZUGAY, JACK		NAME	
STREET ADDRESS	IMG CENTER, SUITE 100, 1360 E 9TH ST		STREET ADDRESS	
CITY-ST-ZIP	CLEVELAND, OHIO 00000 44114-1782		CITY-ST-ZIP	
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALMER, ARNOLD D		NAME	
STREET ADDRESS	IMG CENTER, SUITE 100, 1360 E 9TH ST		STREET ADDRESS	
CITY-ST-ZIP	CLEVELAND, OHIO 00000 44114-1782		CITY-ST-ZIP	
TITLE	VD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCORMACK, MARK H		NAME	
STREET ADDRESS	IMG CENTER, SUITE 100, 1360 E 9TH ST		STREET ADDRESS	
CITY-ST-ZIP	CLEVELAND, OHIO 00000 44114-1782		CITY-ST-ZIP	
TITLE	SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAFAVE, ARTHUR J, JR		NAME	
STREET ADDRESS	IMG CENTER, SUITE 100, 1360 E 9TH ST		STREET ADDRESS	
CITY-ST-ZIP	CLEVELAND, OHIO 00000 44114-1782		CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jack Zugay JACK ZUGAY, Treasurer 3-6-00 (216) 522-1200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2F034 (9/98)