

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

FILED
Apr 21, 2003 8:00 am
Secretary of State

02-25-2003 90114 006 ****61.25

DOCUMENT # F02000006406

1. Entity Name

BOUNDLESS PLAYGROUNDS, INC.



Principal Place of Business

**45 WINTONBURY AVENUE
BLOOMFIELD CT 06002**

Mailing Address

**45 WINTONBURY AVENUE
BLOOMFIELD CT 06002**

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 **06-1512497**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**FARMER, BETTINA
1490 DOWD COURT, S.E.
PALM BAY FL 32909**

7. Name and Address of New Registered Agent

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

TITLE **P** ☐ Delete
NAME **LEFKOWITZ, DAVID R**
STREET ADDRESS **533 COTTAGE GROVE ROAD**
CITY-ST-ZIP **BLOOMFIELD CT 06002**

TITLE **V** ☐ Delete
NAME **BRIGHAM, NEIL**
STREET ADDRESS **115 PERIMETER CENTER PLACE NE S. TERRACES**
CITY-ST-ZIP **ATLANTA GA 30346**

TITLE **S** ☐ Delete
NAME **CORSEY, CHUCK**
STREET ADDRESS **PO BOX 271834**
CITY-ST-ZIP **WEST HARTFORD CT 06106**

TITLE **T** ☐ Delete
NAME **DIZES, SANDOR**
STREET ADDRESS **115 GLASTONBURY BLVD.**
CITY-ST-ZIP **BLOOMFIELD CT 06033**

TITLE **D** ☐ Delete
NAME **BARZACH, AMY**
STREET ADDRESS **45 WINTONBURY AVENUE**
CITY-ST-ZIP **BLOOMFIELD CT 06002**

TITLE **D** ☐ Delete
NAME **JACQUES, BERNARD**
STREET ADDRESS **225 ASYLUM STREET**
CITY-ST-ZIP **HARTFORD CT 06103**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **David McCray** ☐ Addition
NAME **23-7 Thayer Road, Inc.**
STREET ADDRESS **N. Oxford, MA 01537**

TITLE **Kristin D. McGregor, M.D.** ☐ Change ☐ Addition
NAME **465 Buckland Hills Drive #33234**
STREET ADDRESS **Manchester, CT 06040**

TITLE **Doreen Frankel, Ph.D.** ☐ Change ☐ Addition
NAME **TMS**
STREET ADDRESS **5 Woodland Road,**
CITY-ST-ZIP **Minneapolis, MN 55424**

TITLE **Romulo Samaniego** ☐ Change ☐ Addition
NAME **Broad-Park Development Corp.**
STREET ADDRESS **617 Park Street**
CITY-ST-ZIP **Hartford, CT 06106**

TITLE **Peter Barzach** ☐ Change ☐ Addition
NAME **240 Hartford Avenue**
STREET ADDRESS **Newington, CT 06111**

TITLE **Stanley Wiesen** ☐ Change ☐ Addition
NAME **7 Skonet Road**
STREET ADDRESS **West Hartford, CT 06117**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.01(3)(j), 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 another like empowered.

SIGNATURE

[Handwritten Signature] **AMY BARZACH** 4/21/03 860 243 8315