

2002 UNIFORM BUSINESS REPORT (UBR)

0348095 AV

DOCUMENT # F98000003407

1. Entity Name
GLW MEMBER, INC.

FILED

02 MAY 24 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
505 S FLAGLER DR
SUITE 300
WEST PALM BEACH FL 33401

Mailing Address
505 S FLAGLER DR
SUITE 300
WEST PALM BEACH FL 33401



2. Principal Place of Business

3700 STATE STREET

3. Mailing Address

3700 STATE STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 200

SUITE 200

City & State

City & State

SANTA BARBARA, CA

SANTA BARBARA, CA

Zip

Country

Zip

Country

93105 USA

USA

93105 USA

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0843379

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, JACQUELINE S
505 S FLAGLER DR
SUITE 300
WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name AVIS JR. WARREN E
Street Address (P.O. Box Number is Not Acceptable) 125 NORTH AVE. STE 221
AVIS & AVIS P.A.
City PALM BEACH FL Zip Code 33480

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 registering)

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, 2002 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

TITLE	D	<input type="checkbox"/> Delete
NAME	GEORGAS, JOHN W	
STREET ADDRESS	505 S FLAGLER DR STE 300	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	D	<input type="checkbox"/> Delete
NAME	MILLER, JACQUELINE S	
STREET ADDRESS	505 S FLAGLER DR STE 300	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	D	<input type="checkbox"/> Delete
NAME	CHOPIN, L. FRANK	
STREET ADDRESS	505 S FLAGLER DR STE 300	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	P	<input type="checkbox"/> Delete
NAME	GEORGAS, GREGORY	
STREET ADDRESS	250 AUSTRALIAN AVE, SUITE 110	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	VP	<input type="checkbox"/> Delete
NAME	GEORGAS, WILLIAM	
STREET ADDRESS	3700 STATE STREET, SUITE 200	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	ST	<input type="checkbox"/> Delete
NAME	GEORGAS, LAURA	
STREET ADDRESS	551 MADISON AVENUE, 2ND FLOOR	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GEORGAS, JOHN W	
STREET ADDRESS	125 NORTH AVENUE, SUITE 221	
CITY-ST-ZIP	PALM BEACH, FL 33480	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GEORGAS, GREGORY	
STREET ADDRESS	125 NORTH AVENUE, SUITE 221	
CITY-ST-ZIP	PALM BEACH, FL 33480	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)