

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H17976

1. Entity Name

BORU, INC.

FILED
Jan 24, 2000 8:00 am
Secretary of State

01-24-2000 90249 001 ***300.00

Principal Place of Business

1111 N. CONGRESS AVENUE
W. PALM BEACH FL 33409

Mailing Address

1111 N. CONGRESS AVENUE
W. PALM BEACH FL 33409-6317

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-1318711

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

LAUGHLIN, ARTHUR J.
PALM BEACH KENNEL CLUB
1111 NO. CONGRESS AVENUE
W PALM BEACH FL

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.

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

TITLE PD
NAME ROONEY, TIMOTHY J.
STREET ADDRESS 160 WELL RD
CITY-ST-ZIP PALM BEACH FL ☐ Delete

TITLE VD
NAME ROONEY, PATRICK J.
STREET ADDRESS 1111 NORTH CONGRESS AVENUE
CITY-ST-ZIP WEST PALM BEACH FL 33409 ☐ Delete

TITLE STD
NAME ROONEY, JOHN J.
STREET ADDRESS 10942 EGRET POINTE LANE
CITY-ST-ZIP WEST PALM BEACH FL ☐ Delete

TITLE D
NAME ROONEY, DANIEL M.
STREET ADDRESS 940 NORTH LINCOLN
CITY-ST-ZIP PITTSBURG PA ☐ Delete

TITLE D
NAME ROONEY, ARTHUR J., JR.
STREET ADDRESS 1190 WASHINGTON RD
CITY-ST-ZIP PITTSBURGH PA ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 2929 MARYS WAY
CITY-ST-ZIP Palm Beach Gardens, FL 33410

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

TITLE ☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/2000

Date

Daytime Phone #

CR2E034 (9/99)