

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000003938

1. Entity Name

DO THE RIGHT THING OF PALM BEACH COUNTY, INC.

FILED  
Apr 03, 2002 8:00 am  
Secretary of State

04-03-2002 90031 048 \*\*\*\*61.25

0075822

Principal Place of Business

Mailing Address

38840 STATE ROAD 80  
BELLE GLADE FL 33430

38840 STATE ROAD 80  
BELLE GLADE FL 33430

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

65-1052106

Applied For

Not Applicable

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

BAIR, MICHAEL C  
38840 STATE ROAD 80  
BELLE GLADE FL 33430

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 Michael Bair

3-25-02

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  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME PD  
STREET ADDRESS BAIR, MICHAEL C  
CITY-ST-ZIP 38840 STATE ROAD 80  
BELLE GLADE FL 33430 ☐ Delete

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

TITLE  
NAME D  
STREET ADDRESS PACE, GARY  
CITY-ST-ZIP 38840 STATE ROAD 80  
BELLE GLADE FL 33430 ☐ Delete

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

TITLE  
NAME VD  
STREET ADDRESS PADGETT, THOMAS  
CITY-ST-ZIP 38840 STATE ROAD 80  
BELLE GLADE FL 33430 ☐ Delete

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

TITLE  
NAME SD  
STREET ADDRESS QUINONES, LUCY  
CITY-ST-ZIP 38840 STATE ROAD 80  
BELLE GLADE FL 33430 ☐ Delete

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

TITLE  
NAME TD  
STREET ADDRESS BAIR, GLENN  
CITY-ST-ZIP 1037 TABIT ROAD  
BELLE GLADE FL 33430 ☐ Delete

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

TITLE  
NAME D  
STREET ADDRESS MERICANTANTE, JOHN  
CITY-ST-ZIP 1200 E. MAIN STREET  
PAHOKEE FL 33476 ☐ Delete

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

Date

Daytime Phone #

CR2E037 (9/01)