

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000005005

1. Entity Name

THE PEACE AMBASSADORS' INSTITUTE, INC.

Principal Place of Business

10659 NE 11TH COURT
MIAMI SHORES FL 33138

Mailing Address

10659 NE 11TH COURT
MIAMI SHORES FL 33138

2. Principal Place of Business

14401 N. MIAMI AVE.

Suite, Apt. #, etc.

3. Mailing Address

14401 N. Miami Ave.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

Zip

33168

Country

USA

Zip

33168

Country

USA

4. FEI Number

65-1032242

☒ Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MAIGNAN, GENEVIEVE
10659 NE 11TH COURT
MIAMI SHORES FL 33138

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

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

TITLE	D	<input type="checkbox"/> Delete
NAME	CONNOR, CRYSTAL	
STREET ADDRESS	6864 S.W. 114TH PLACE #G	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE	D	<input type="checkbox"/> Delete
NAME	MAIGNAN, GENEVIEVE	
STREET ADDRESS	10659 NE 11TH COURT	
CITY-ST-ZIP	MIAMI SHORES FL 33138	
TITLE	D	<input type="checkbox"/> Delete
NAME	TERRY, KATHY	
STREET ADDRESS	P.O. BOX 140873	
CITY-ST-ZIP	CORAL GABLES FL 33114	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	FRONHEISER, DAVID	
STREET ADDRESS	169 E. FLAGLER STREET 2ND FLOOR	
CITY-ST-ZIP	MIAMI FL 33131	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	BOARD OF Directors	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALLAN DOYLE	
STREET ADDRESS	14401 N. Miami Ave.	
CITY-ST-ZIP	Miami, FL 33168	
TITLE	BOARD OF DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAIGNAN, GENEVIEVE	
STREET ADDRESS	14401 N. MIAMI AVE.	
CITY-ST-ZIP	Miami, FL 33168	
TITLE	BOARD OF DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Miriam Charleston	
STREET ADDRESS	14401 N. Miami Ave.	
CITY-ST-ZIP	Miami, FL 33168	
TITLE	KATHY PHILLIPS Board of Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KATHY PHILLIPS	
STREET ADDRESS	14401 N. MIAMI AVE.	
CITY-ST-ZIP	Miami, FL 33168	
TITLE	BOARD OF DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JILL STRUBE	
STREET ADDRESS	14401 N. Miami Ave.	
CITY-ST-ZIP	Miami, FL 33168	
TITLE	Board of Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Phillip Caldwell	
STREET ADDRESS	14401 N. Miami Ave.	
CITY-ST-ZIP	Miami, FL 33168	

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
May 01, 2001 8:00 am
Secretary of State

05-01-2001 90118 023 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)