2001 UNIFORM BUSINESS REPORT (UBR)

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FILED
Mar 27, 2001 8:00 am
Secretary of State
02-07-2001 90130 025 ****61.25

DOCUMENT # N00000006251

1. Entity Name

DR. GEORGE AND JACQUELINE WEISS FOUNDATION, INC.

Principal Place of Business	Mailing Address
5279 FOUNTAIN DR. SOUTH APT. 201 LAKE WORTH FL 33467	5279 FOUNTAIN DR. SOUTH APT. 201 LAKE WORTH FL 33467

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5279 FOUNTAINS DR So	Same
Suite, Apt. #, etc.: Apt 201	Suite, Apt. #, etc.
City & State: LAKE WORTH, FLA	City & State
Zip: 33467 County	Zip: 33467 Country

4. FEI Number: 31-1723547 ☑ 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
WEISS, GEORGE A DR. 5279 FOUNTAIN DR. SOUTH APT. 201 LAKE WORTH FL 33467	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: George A. Weiss 1/20/01
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 / STREET ADDRESS / CITY-ST-ZIP	PRES George A. Weiss D	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRES 5279 FOUNTAINS DR So ☐ Change ☐ Addition Lake Worth, Fla 33467
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY D Jacqueline H. Weiss	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY 5279 Fountains Dr So ☐ Change ☐ Addition Lake Worth, Fla 33467
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Ellen Weiss T	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR ☐ Change ☐ Addition 1003 BRAES MEADOW Lane Sugarland Texas 77479
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Leslie Schoenfeld T	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR ☐ Change ☐ Addition 15401 QUEENSFERRY RD FORT MYERS FLA 33912
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/00)

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: George A. Weiss 1/16/01 561-641-0340
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #