

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0036624

DOCUMENT # N00000007800

1. Entity Name

THE VA EDUCATION FOUNDATION OF THE PALM BEACHES CORPORATION



FILED

03 MAY -2 PM 2:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

7305 N. MILITARY TRAIL  
W. PALM BCH FL 33410

Mailing Address

7305 N. MILITARY TRAIL  
W. PALM BCH FL 33410

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 65-1075595

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOODY, AUSTIN  
7305 N. MILITARY TRAIL  
W. PALM BCH FL 33410

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. I am familiar with, and accept the obligations of registered agent.

100017914651  
05/02/03--01091--024 \*\*61.25

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  
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D  
NAME SEILER, EDWARD  
STREET ADDRESS 7305 N. MILITARY TRAIL  
CITY-ST-ZIP W. PALM BCH FL 33410 ☐ Delete

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

TITLE D  
NAME VARA, JOHN  
STREET ADDRESS 7305 N. MILITARY TRAIL  
CITY-ST-ZIP W. PALM BCH FL 33410 ☒ Delete

TITLE D  
NAME PARRINO, Thomas A  
STREET ADDRESS 7305 N. MILITARY TRAIL  
CITY-ST-ZIP W. PALM Beach, FL 33410 ☒ Change ☐ Addition

TITLE D  
NAME ISTVAN, KRISKO  
STREET ADDRESS 1515 FLAGLER DRIVE STE 800  
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Delete

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

TITLE TS  
NAME HOWARD, SUSAN  
STREET ADDRESS 7305 N MILITARY TRAIL  
CITY-ST-ZIP WEST PALM BEACH FL 33410 ☒ Delete

TITLE D  
NAME NOVOTNY, SHANNON  
STREET ADDRESS 7305 N MILITARY TRAIL  
CITY-ST-ZIP WEST PALM BEACH, FL 33410 ☐ Change ☒ Addition

TITLE D  
NAME BOYKIN, ANNE  
STREET ADDRESS 777 GLADES RD  
CITY-ST-ZIP BOCA RATON FL 33431 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE M  
NAME RIBNIKAR, JOHN P  
STREET ADDRESS 7305 N Military Trail  
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Change ☒ Addition

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: SUBNATU Ribnikar / JOHN P Ribnikar 4.27.03 561-882-6767

CR2E037 (10/02)