

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N00544**

1. Entity Name

INTRACOASTAL HEALTH FOUNDATION, INC.

Principal Place of Business

505 S. FLAGLER DR
SUITE 600
W PALM BCH FL 33401

Mailing Address

505 S. FLAGLER DR
SUITE 600
W PALM BCH FL 33401

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

59-2391119

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

LARCOMB, VALERIE G ESQ
AKERMAN SENTERFITT - PHILLIPS PT.- E. TWR.
777 SOUTH FLAGLER DRIVE, SUITE 900
WEST PALM BEACH FL 33401-6125

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE C ☒ Delete
NAME SCHULMAN, DOROTHY
STREET ADDRESS 505 S. FLAGLER DR., #600
CITY-ST-ZIP W PALM BCH FL 33401TITLE C ☐ Change ☒ Addition
NAME David B. Robb, Jr.
STREET ADDRESS 1309 N. Flagler Drive
CITY-ST-ZIP West Palm Beach, FL 33401TITLE VP ☒ Delete
NAME MATTHEWS, BETSY
STREET ADDRESS 505 S FLAGLER DR STE 600
CITY-ST-ZIP W. PALM BEACH FL 33401TITLE S ☐ Change ☒ Addition
NAME Suzette Wexner
STREET ADDRESS 1309 N. Flagler Drive
CITY-ST-ZIP West Palm Beach, FL 33401TITLE VC ☒ Delete
NAME ROBB, DAVID
STREET ADDRESS 505 S. FLAGLER DR, #600
CITY-ST-ZIP W. PAL BEACH FL 33401TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE VCD ☒ Delete
NAME ANDERSON, JOHN
STREET ADDRESS 505 S. FLAGLER DR, #600
CITY-ST-ZIP W. PAL BEACH FL 33401TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE D ☒ Delete
NAME PHILLIP C DUTCHER
STREET ADDRESS 505 S. FLAGLER DR, #600
CITY-ST-ZIP W. PAL BEACH FL 33401TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE D ☒ Delete
NAME DENNID STEFANACCI
STREET ADDRESS 505 S. FLAGLER DR, #600
CITY-ST-ZIP W. PAL BEACH FL 33401TITLE ☐ Change ☐ Addition
NAME
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90289 001 *1,185.00

72279



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)

INTRACOASTAL HEALTH FOUNDATION, INC.

BOARD OF TRUSTEES

2001

*Attachment
100544
72279*

David B. Robb, Jr. Chairman
1309 N. Flagler Drive
W. Palm Beach, FL 33401

Mrs. Tina Bilotti
1309 N. Flagler Drive
W. Palm Beach, FL 33401

Joan Eigen (Mrs. Robert)
1309 N. Flagler Drive
W. Palm Beach, FL 33401

Robert Jaffe (Ellen)
1309 N. Flagler Drive
W. Palm Beach, FL 33401

Lee Munder
1309 N. Flagler Drive
W. Palm Beach, FL 33401

Mrs. Edie Schur
1309 North Flagler Drive
W. Palm Beach, FL 33401

Mrs. Dorothy Schulman
1309 N. Flagler Drive
W. Palm Beach FL 33401

James Zisson
1309 N. Flagler Drive
W. Palm Beach, FL 33401

Mrs. Suzette Wexner
1309 N. Flagler Drive
W. Palm Beach, FL 33401