

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000004646

1. Entity Name

JUPITER TEQUESTA SUNRISE ROTARY CLUB OF SOUTH FL  
ORIDA, INC.

Principal Place of Business

Mailing Address

1001 N. US HWY. 1, STE. 304  
JUPITER FL 33477

PO BOX 3643  
TEQUESTA FL 33469

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

65-0288561

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

BERROCAL, CARLOS J  
801 MAPLEWOOD DR., STE. 22-A  
JUPITER FL 33458

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 ☐ Delete  
NAME D  
STREET ADDRESS FRIEDKIN, RICHARD  
CITY-ST-ZIP 10221 HERON WOOD LN.  
WEST PALM BEACH FL 33412

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

TITLE ☐ Delete  
NAME D  
STREET ADDRESS TAMBOR, RICHARD  
CITY-ST-ZIP 300 OCEAN TRAIL, #1401  
JUPITER FL 33477

TITLE ☒ Change ☐ Addition  
NAME Director  
STREET ADDRESS Boyhan, Tom  
CITY-ST-ZIP 342 Honey Penna Drive  
Jupiter, FL 33458

TITLE ☐ Delete  
NAME D  
STREET ADDRESS WOOD, LISA  
CITY-ST-ZIP 316 4TH ST.  
JUPITER FL 33458

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

TITLE ☐ Delete  
NAME D  
STREET ADDRESS NICKERSON, DAVID K JR  
CITY-ST-ZIP 1001 N. US HWY. 1, STE. 304  
JUPITER FL 33477

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ 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:

*Lisa Wood Pres.* 1/10/02 561-744-2875

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)