

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

FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90238 012 ****61.25

DOCUMENT # NO1000007208

1. Entity Name

BOCA RATON BROMELIAD SOCIETY, INC.



Principal Place of Business

**22690 LEMON TREE LANE
BOCA RATON FL 33428**

Mailing Address

**22690 LEMON TREE LANE
BOCA RATON FL 33428**

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 **65-1147965**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MARKS, TAMMY
22690 LEMON TREE LANE
BOCA RATON FL 33428**

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

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	PD	☐ Delete
NAME	HAVLIK, MARK D	
STREET ADDRESS	747 CAMINO LAKES CIR	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	VD	☐ Delete
NAME	IRVINE, JOHN	
STREET ADDRESS	1221 18TH AVENUE	
CITY-ST-ZIP	LAKE WORTH FL	
TITLE	SD	☐ Delete
NAME	MARKS, TAMMY	
STREET ADDRESS	22690 LEMON TREE LANE	
CITY-ST-ZIP	BOCA RATON FL 33428	
TITLE	TD	☐ Delete
NAME	ESSER, CAROL	
STREET ADDRESS	11541 SW 12TH TERRACE	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	D	☐ Delete
NAME	HAVLIK, MAUREEN	
STREET ADDRESS	747 NCAMINO LAKES CIR	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	D	☐ Delete
NAME	KAUFFMAN, SALLY	
STREET ADDRESS	19572 COLORADO CIR	
CITY-ST-ZIP	BOCA RATON FL 33434	

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
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: *Mark D. Havlik, President* **Mark D. Havlik** 2/19/03 561368 6275

CR2E037 (10/02)