

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

FILED
Jun 13, 2003 8:00 am
Secretary of State

05-23-2003 90144 036 ****61.25

DOCUMENT # N02000001101

1. Entity Name

TIGER LILL'S FOUNDATION, INC.



Principal Place of Business

1956 FOX COURT
WELLINGTON FL 33414

Mailing Address

C/O BRIAN CHELACK ESO
777 SOUTH FLAGLER DRIVE SUITE 500 EAST
WEST PALM BEACH FL 33401

55048006

2. Principal Place of Business

723 CONNESTEE RD.

Suite, Apt. #, etc.

3. Mailing Address

723 CONNESTEE RD.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

WEST PALM BEACH, FL

City & State

WEST PALM BEACH, FL

4. FEI Number

02-0546466

Applied For

☐ Not Applicable

Zip

33413

Country

USA

Zip

33413

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COMPSON, ANNETTE
1956 FOX COURT
WELLINGTON FL 33414

7. Name and Address of New Registered Agent

Name **ROBINS, GEORGE**

Street Address (P.O. Box Number is Not Acceptable)
723 CONNESTEE RD.

City

WEST PALM BEACH, FL

Zip Code

33413

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

GEORGE ROBINS, PRES.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

5/1/03

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

TITLE **D** ☐ Delete
NAME **ROBINS, GEORGE**
STREET ADDRESS **1956 FOX COURT**
CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE **D** ☐ Delete
NAME **LILLEY, RENATA**
STREET ADDRESS **1956 FOX COURT**
CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE **D** ☐ Delete
NAME **COMPSON, ANNETTE**
STREET ADDRESS **1956 FOX COURT**
CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Change ☐ Addition
NAME **ROBINS, GEORGE**
STREET ADDRESS **723 CONNESTEE RD.**
CITY-ST-ZIP **WEST PALM BEACH, FL 33413**

TITLE **D** ☒ Change ☐ Addition
NAME **LILLEY, RENATA**
STREET ADDRESS **1531-23A DREXEL RD.**
CITY-ST-ZIP **WEST PALM BEACH, FL 33417**

TITLE **D** ☒ Change ☐ Addition
NAME **COMPSON, ANNETTE**
STREET ADDRESS **1956 FOX COURT**
CITY-ST-ZIP **WELLINGTON, FL 33414**

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:

GEORGE ROBINS, PRES.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/03

DATE

561-352-1090

DAYTIME PHONE #

CR2E037 (10/02)