

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

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90829 003 ****61.25

0036244

DOCUMENT # NO2000007896

1- Entity Name

TOYS FOR TOTS OF PALM BEACH COUNTY, INC.



Principal Place of Business

**NORTH PALM BEACH COUNTRY CLUB
951 U.S. HIGHWAY 1
NORTH PALM BEACH FL 33408**

Mailing Address

**NORTH PALM BEACH COUNTRY CLUB
951 U.S. HIGHWAY 1
NORTH PALM BEACH FL 33408**

2. Principal Place of Business

540 CAPTAINS RD

3. Mailing Address

540 CAPTAINS RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

NORTH PALM BEACH, FL

City & State

NORTH PALM BEACH, FL

Zip

33408

Country

USA

Zip

33408

Country

USA

4. FEI Number

06-1654201

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

**D'AMBRA, EDWARD D
540 CAPTAINS RD.
NORTH PALM BEACH FL 33408**

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

Edward D'Ambrada **Edward D'AMBRA**

04/28/03

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

TITLE **TD** ☐ Delete
NAME **BONEPARTH, CHARLES**
STREET ADDRESS **200 OCEAN TRAIL WAY APT. 202**
CITY-ST-ZIP **JUPITER FL 33477**

TITLE **SVD** ☐ Delete
NAME **D'AMBRA, EDWARD**
STREET ADDRESS **756 WATERWAY DRIVE**
CITY-ST-ZIP **NORTH PALM BEACH FL 33408**

TITLE **PD** ☐ Delete
NAME **BRADY, RAY**
STREET ADDRESS **540 CAPTAINS ROAD**
CITY-ST-ZIP **NORTH PALM BEACH FL 33408**

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

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

TITLE ☐ Change ☐ Addition
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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:

Ray Brady

04/28/03

561 881-8914

CR2E037 (10/02)