

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 21 AM 9:48**

DOCUMENT # N02168 (5)

1. Corporation Name

BIG BROTHERS/BIG SISTERS FOUNDATION OF PALM BEACH COUNTY, INC.

Principal Place of Business

Mailing Address

424 S CONGRESS AVE
W. PALM BEACH FL 33406

424 S CONGRESS AVE
W. PALM BEACH FL 33406

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

03/21/1984

04/08/1994

4. FEI Number

Applied For

59-2403436

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status

\$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business

2a. Mailing Address

21 2112 Congress Ave. South

26 2112 Congress Ave. South

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 200

27 200

City & State

City & State

23 West Palm Beach, FL

28 West Palm Beach, FL

Zip

Country

Zip

Country

24 33406

25 Palm Beach

29 33406

30 Palm Beach

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARTINELLI, VICTOR
C/O 424 SOUTH CONGRESS AVE
WEST PALM BEACH FL 33406

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2112 Congress Avenue South, Suite 200

83

84 City

West Palm Beach

FL

85 Zip Code

33406

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: D
NAME: BLANEY, JERRI M
STREET ADDRESS: 11380 PROSPERITY FARMS RD., #203
CITY - ST - ZIP: PALM BEACH GARDENS FL 33410

1.1 TITLE: Change Addition
1.2 NAME: Delete
1.3 STREET ADDRESS:
1.4 CITY - ST - ZIP:

TITLE: D
NAME: CAWLEY, WES
STREET ADDRESS: 324 ROYAL PALM WAY
CITY - ST - ZIP: PALM BEACH FL

2.1 TITLE: Change Addition
2.2 NAME: Delete
2.3 STREET ADDRESS:
2.4 CITY - ST - ZIP:

TITLE: DV
NAME: SPENCER, JERRY
STREET ADDRESS: 2626 ELECTRONICS WAY
CITY - ST - ZIP: W.PALM BEACH FL

3.1 TITLE: Change Addition
3.2 NAME:
3.3 STREET ADDRESS:
3.4 CITY - ST - ZIP:

TITLE: DP
NAME: MARTINELLI, VICTOR
STREET ADDRESS: 1830 CLARE AVE.
CITY - ST - ZIP: W.PALM BEACH FL

4.1 TITLE: Change Addition
4.2 NAME:
4.3 STREET ADDRESS:
4.4 CITY - ST - ZIP:

TITLE: DT
NAME: COLBURN, HARRY, S, JR
STREET ADDRESS: 321 ROYAL POINCIANA PLZ
CITY - ST - ZIP: PALM BEACH FL

5.1 TITLE: Change Addition
5.2 NAME: Delete
5.3 STREET ADDRESS:
5.4 CITY - ST - ZIP:

TITLE: D
NAME: WILLIAMSON, BRUCE, G
STREET ADDRESS: 2750 NW TIMBERCREEK CIR
CITY - ST - ZIP: BOCA RATON FL

6.1 TITLE: Change Addition
6.2 NAME: Michael Pucillo
6.3 STREET ADDRESS: 222 Lakeview Avenue, Suite 960
6.4 CITY - ST - ZIP: West Palm Beach, FL 33401

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Victor Martinelli

Victor Martinelli

407-966-4120

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone