

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2002 8:00 am
Secretary of State

03-14-2002 90084 044 ****61.25

DOCUMENT # N08686

1. Entity Name

BOCA RATON FOUNDATION, INC.

Principal Place of Business

Mailing Address

1515 N. FEDERAL HWY
 #222
 BOCA RATON FL 33432
 US

1515 N. FEDERAL HWY
 #222
 BOCA RATON FL 33432
 US

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 **59-2604493**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional Fee Required

8. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BONITATIBUS, PETER N
1515 N. FEDERAL HWY
#222
BOCA RATON FL 33432

Name

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

1300 N. FEDERAL HWY**#202**City **BOCA RATON****FL**Zip Code **33432**

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

Peter N Bonitatibus
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

3/3/02

DATE

FILE NOW: FEE IS \$61.259. 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 **PD** ☐ Delete
 NAME **SMITH, DENNIS W**
 STREET ADDRESS **1329 THATCH PALM DRIVE**
 CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE **VD** ☒ Delete
 NAME **CRASKE, ROBERT B**
 STREET ADDRESS **339 E COCONUT PALM RD**
 CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE **TD** ☐ Delete
 NAME **BONITATIBUS, PETER N**
 STREET ADDRESS **6790 ALLEGRE CT**
 CITY-ST-ZIP **GULFSTREAM**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 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 **BOCA RATON FL 33432**

TITLE ☐ Change ☒ Addition
 NAME **TONY BONITATIBUS (D)**
 STREET ADDRESS **1300 N. FEDERAL HWY #202**
 CITY-ST-ZIP **BOCA RATON FL 33432**

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 lists empowered.

SIGNATURE:

Peter N Bonitatibus
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/02**561-391-1411**

Date

Daytime Phone #

CR2E037 (9/01)