

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State
 04-26-2001 90097 007 *****70.00

0051027

DOCUMENT # N10399

1. Entity Name

COMPREHENSIVE AIDS PROGRAM OF PALM BEACH COUNTY,

Principal Place of Business

2580 METROCENTRE BLVD.
 SUITE 2
 WEST PALM BEACH FL 33407
 US

Mailing Address

P. O. BOX 18887
 WEST PALM BEACH FL 33416-8887
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2582229

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ARNOLD, CLAIRE J
31 W CYPRESS RD
LAKE WORTH FL 33467

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.

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
PD
ARNOLD, CLAIRE J
31 W CYPRESS RD
LAKE WORTH FL 33467 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
SD
HIGDON, GLENN
2210 22ND LANE
LAKE WORTH FL 33463 ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
SD
Melvin Fowler
218 7th Street, Apartment 5
Lake Park, FL 33403 ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
TD
KARYL NEAL
4400 PGA BLVD #400
PALM BCH GDNS FL 33410 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VD
COOPER, SCOTT
8743 WAKEFIELD DR
PALM BCH GARDENS GL 33410 ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VD
Anthony Mack
1803 Tamarind Avenue
West Palm Beach, FL 33407 ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 19, 2001 (56)737-7733
 Date Daytime Phone #

CR2E037 (10/00)