FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N19137

(1)

VARIETY CLUB OF THE PALM BEACHES, INC.

| Principal Plac | ce of Business | Mailing Address | | <u> </u> | 81 0 1834 0 1811 8 1841 8 1811 0 1814 0 1814 18 |
|--|--|--|---|--|--|
| 2875 S OCEAN BLVD SUITE 200 7 PALM BEACH FL 33480 | | 2875 S OCEAN BLVD SUITE 200 7 PALM BEACH FL 33480-5591 US | | | |
| US | | | | 3. Date incorporated or Qualified 02/09/1987 | 3a. Date of Last Report 05/01/1996 |
| 2. Principal Place of Business | | 2a. Mailing Address | | 4. FEI Number | Applied For |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 59-2806086 | Not Applicable |
| 22 City & State | | 27 | | 5. Certificate of Status Desired | \$8.75 Additional Fee Regulred |
| 23 | | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| Zip | Country | Zip | Country | Trust Fund Contribution | Added to Fees |
| 24 | 25 | - | 30 | This corporation has liability for in Florida Statutes | rangible tax under s. 199.032, Yes X No |
| | 9. Name and Address of Current | | <u></u> | 10. Name and Address of New Reg | |
| FLANZIG, THERESA 8217 HORSHESHOE BAY ROAD BOYNTON BEACH FL 33437 81 Name AS KIN ARLEWE A. 82 Street Address (P.D. Box Number is Not Acceptable) 83 B4 City ST PALM BEACH FL 85 Zip Code. | | | | | |
| 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-hamod 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 Suction 617.0503, Florida Statutes. | | | | | |
| SIGNATURE | Signifium, typed or printed name of registered agent | below, PR | ESIDENT Registered Agent signature requi | | 1-1-71 |
| 12. | OFFICERS AND | | Hegislered Agent signature requi | red when reinstating) ADDITIONS/CHANGES TO OFFICE | DATE |
| TITLE | P | DELETE | 1.1 TUTLE | ADDITIONS/CHANGES TO GAMCE | Change Addition |
| NAME | BASKIN, ARLENE | | 1.2 NAME | | C onlinge S Addition |
| STREET ADDRESS | PLYMOUTH D-31 | | 1.3 STREET ADDRESS | | 1 |
| CITY-ST-ZIP | WEST PALM BEACH FL | | 1.4 CITY-ST-ZIP | | • |
| TITLE | C | DELETE | 2.1 TITLE | | Change Addition |
| NAME | SHAPIRO, IRVING | | 2.2 NAME | | [|
| STREET ADDRESS | 2425 PRESIDENTIAL WAY 1504 | \ | 2.3 STREET ADDRESS | | j |
| CITY-ST-ZIP | WEST PALM BEACH FL | | 2.4 CITY-ST-ZIP | | 1 |
| TITLE | D | DELETE | 3.1 TITLE | | Change Addition |
| NAME | ADLER, MARTIN H | | 3.2 NAME | | 1 |
| STREET ADDRESS | 352 EAGLE DR | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP TITLE | JUPITER FL | Document | 3.4. CITY-ST-ZIP | | |
| | D CULTIMANI ALVANI | DELETE " | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME Street Address | SHULMAN, ALVIN 4605 S OCEAN BLVD 58 | | 4. 2 NAME | | |
| 1 | HIGHLAND BEACH FL | | 4.3 STREET ADDRESS | | ł |
| CITY-ST-ZIP TITLE | D DENOTE LE | DELETE | 4.4 CITY-ST-ZIP 51 TITLE | | Change |
| NAME | NECTOW, HAROLD | - Detroit | 5.2 NAME | | Change Addition |
| STREET ADDRESS | 2780 S. OCEAN BLVD #110 | | 5.3 STREET ADDRESS | | 1 |
| CITY-ST-ZIP | PALM BCH GRDNS FL | | 5.4 CITY-ST-ZIP | | į |
| TITLE | 22 | DELETE | 6.1 TITLE | | Change Addition |
| NAME | | - | 6.2 NAME | | noonton |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | . |
| CITY-ST-ZIP | | | 6.4 CITY-ST-ZIP | | |
| 14. I do 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 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 rustee ampowered 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. | | | | | |