

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

FILED
Mar 20, 2003 8:00 am
Secretary of State

03-20-2003 90125 046 ****61.25

DOCUMENT # N21731

1. Entity Name

UNITED FILIPINO AMERICAN ASSOCIATION OF PALM BEACH COUNTY, INC.



Principal Place of Business

**1215 BEAR 15 DR.
WEST PALM BEACH FL 33409
US**

Mailing Address

**1215 BEAR 15 DR.
WEST PALM BEACH FL 33409
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2836761**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PHOEBELYN G. GUERZON, MD
1217 ISLAND SHORES DRIVE
WEST PALM BEACH FL 33409**

7. Name and Address of New Registered Agent

Name **PHOEBELYN G. GUERZON, M.D.**
Street Address (P.O. Box Number is Not Acceptable)
**1215 BEAR ISLAND DRIVE
WEST PALM BEACH
FL 33409**

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: *Phoebelyn G. Guerzon, MD* **PHOEBELYN G. GUERZON, MD**

1/13/03

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 NAME STREET ADDRESS CITY-ST-ZIP	P GUERZON, PHOEBELYN G M.D. 1215 BEAR ISLAND DR. WEST PALM BEACH FL 33409	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V UM, RACHEL 110 SARATOGA BLVD ROYAL PALM BEACH FL 33411	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BARRAMEDA, ESTHER MD 141 ALCAZAR ST. ROYAL PALM BEACH FL 33411	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S AGUIRRE, CARLOS 4266 GOLGERS CIRCLE EAST PALM BEACH GARDENS FL 33410	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ENGLE, MYRNA 3687 HOLIDAY ROAD PALM BEACH GARDEN FL 33410	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WATSON, ZENaida ZENAIDA 914 45TH STREET WEST PALM BEACH FL 33407	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ESTER CALALO 5445 THURSTON AVE LAKE WORTH, FL 33463	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MERCEDES AGUIRRE 4266 GOLFER'S CIRCLE PALM BEACH GARDENS, FL 33410	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AMELIA LA PLANTE 5505 BERRY BLOSSOM WAY WEST PALM BEACH, FL 33415	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ELENA DIGENNARO 680 NE MARINE DRIVE BOCA RATON, FL 33461	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EPITH PEARSON 2602 SOUTH GARDEN DRIVE #307 LAKE WORTH, FL 33461	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOCELYN DOE 1024 SUMMER WOOD CIRCLE WELLINGTON, FL 33414	<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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: *Phoebelyn G. Guerzon* **PHOEBELYN G. GUERZON** **1/13/03** **561-882-8262 x334**

CR2E037 (10/02)