2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2000 8:00 am
Secretary of State
05-23-2000 90261 050 ****61.25

DOCUMENT # N26535

1. Entity Name

ROBERT A. GARDNER M. D. FOUNDATION, INC.

Principal Place of Business	Mailing Address
2625 NORTH FLAGLER DRIVE W. PALM BEACH FL 33407 US	2625 NORTH FLAGLER DRIVE W. PALM BEACH FL 33407-5505 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2151 45th STREET	2151 45th STREET
Suite, Apt. #, etc.: SUITE 208	Suite, Apt. #, etc.: 208
City & State: WEST PALM BEACH, FL. 33407	City & State: WEST PALM BEACH, FL
Zip: 33407 Country: USA	Zip: 33407 Country: USA

4. FEI Number 65-0075293 ☐ Applied For ☐ Not Applicable

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
POSNER, MICHAEL J 4420 BEACON CIRCLE SUITE #100 W. PALM BEACH, FL 33407	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 ____________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	PD ☐ Delete	☐ Change ☐ Addition
NAME	WARD, PHILIP H III	
STREET ADDRESS	% 4420 BEACON CIRCLE, SUITE #100	
CITY-ST-ZIP	W. PALM BEACH FL 33407	
TITLE	D ☐ Delete	☐ Change ☐ Addition
NAME	PHILIP, WARD H 111	
STREET ADDRESS	4420 BEACON CIR STE 100	
CITY-ST-ZIP	WPB FL 33407	
TITLE	D ☐ Delete	☐ Change ☐ Addition
NAME	GARDNER, ROBERT	
STREET ADDRESS	2625 NORTH FLAGLER DR.	
CITY-ST-ZIP	W. PALM BEACH FL 33407	
TITLE	D ☐ Delete	☐ Change ☐ Addition
NAME	GARDNER, ROBER	
STREET ADDRESS	2625 N FLAGLER DR	
CITY-ST-ZIP	WPB FL 33401	
TITLE	D ☐ Delete	☐ Change ☐ Addition
NAME	GARDNER, LORETTA	
STREET ADDRESS	2625 N. FLAGLER DR.	
CITY-ST-ZIP	WPB FL 33407	
TITLE	☐ Delete	☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E031 (1/99)

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: Robert A Gardner REQUIRED   Apr 30, 2000   (561) 881-9100