

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N28317

DEPARTMENT OF STATE
POST ONLY

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90134 010 ****61.25

1. Entity Name

THE MICHAEL D. AND MARILYN T. WINER FOUNDATION, INC.

Principal Place of Business

Mailing Address

4601 COMMUNITY DRIVE
WEST PALM BEACH FL 33417-9760

4601 COMMUNITY DRIVE
WEST PALM BEACH FL 33417-9760

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

65-0086173

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

PHILLIPS, EUGENE

JEWISH FEDERATION OF PLAM BEACH COUNTY INC

4601 COMMUNITY DRIVE

WEST PALM BEACH FL 33417

Name

Michelle Wasch Schwartz

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

Jewish Federation of Palm Beach County

4601 Community Drive

City

West Palm Beach

FL

Zip Code

33417

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

Michelle Wasch Schwartz

4/18/02

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 PD
NAME WINER, MICHAEL D. ☐ Delete
STREET ADDRESS 6319 BRANDON STREET
CITY-ST-ZIP PALM BCH GARDENS FL

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

TITLE VD
NAME WINER, MARILYN T. ☐ Delete
STREET ADDRESS 6319 BRANDON STREET
CITY-ST-ZIP PALM BCH GARDENS FL

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

TITLE D
NAME KLEIN, JEFFREY L. ☐ Delete
STREET ADDRESS 7905 TENNYSON CT
CITY-ST-ZIP BOCA RATON FL

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

TITLE D
NAME SIMON, ADELE ☐ Delete
STREET ADDRESS 1883 INDIAN ROAD
CITY-ST-ZIP LAKE CLARKE SHORES FL 33406

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

TITLE SD
NAME GREEN, BARBARA G. ☐ Delete
STREET ADDRESS 583 NORTH LAKE WAY
CITY-ST-ZIP PALM BEACH FL

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

TITLE T
NAME FELDMAN, HOWARD A ☒ Delete
STREET ADDRESS 4601 COMMUNITY DRIVE
CITY-ST-ZIP WEST PALM BEACH FL 33417

TITLE Treasurer ☐ Change ☒ Addition
NAME Michelle Wasch Schwartz
STREET ADDRESS 2652 NW 46th Street
CITY-ST-ZIP Boca Raton, FL 33434

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:

Michelle Wasch Schwartz

4/18/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/01)