

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N30172

1. Entity Name

THE FLORIDA CHAPTER OF THE SOCIETY FOR SOCIAL WO

Principal Place of Business

Mailing Address

1151 SW 10TH STREET  
PEMBROKE PINES FL 33025  
US

1151 SW 10TH STREET  
PEMBROKE PINES FL 33025-4328  
US

2. Principal Place of Business

5168 TENNIS LANE

3. Mailing Address

5168 TENNIS LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DELRAY BEACH, FL

City & State

DELRAY BEACH, FL

Zip

33484-6635

Country

USA

Zip

33484-6635

Country

USA

4. FEI Number

59-2908776

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

POMPEO, ROBERT J  
11511 SW 10TH STREET  
PEMBROKE PINES FL 33025

7. Name and Address of New Registered Agent

Name MARY J. KAUFMAN

Street Address (P.O. Box Number is Not Acceptable)  
5168 TENNIS LANE

City DELRAY BEACH

FL

Zip Code 33484-6635

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 *Mary J. Kaufman*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/18/00  
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

TITLE PD ☐ Delete

NAME BUTTS, TERESA  
STREET ADDRESS 1800 BARRS ST  
CITY-ST-ZIP JACKSONVILLE FL 32204

TITLE TD ☒ Delete

NAME POMPEO, ROBERT  
STREET ADDRESS 11511 SW 10TH STREET  
CITY-ST-ZIP PEMBROKE PINES FL 33025

TITLE SD ☐ Delete

NAME NORRIS, MARY  
STREET ADDRESS 1414 KUHLE AVENUE  
CITY-ST-ZIP ORLANDO FL 32812

TITLE D ☐ Delete

NAME COOK, CATHY  
STREET ADDRESS BOX 100306  
CITY-ST-ZIP GAINESVILLE FL 32610

TITLE VPD ☐ Delete

NAME PREWITT, CYNTHIA  
STREET ADDRESS PO BOX 6000  
CITY-ST-ZIP Ocala FL 32671

TITLE D ☒ Delete

NAME MCKEON, WILLIAM JR  
STREET ADDRESS 1611 NW 12TH AVE RM C102  
CITY-ST-ZIP MIAMI FL 33136

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Change ☐ Addition

NAME KAUFMAN, MARY J.  
STREET ADDRESS 5168 Tennis Lane  
CITY-ST-ZIP Delray Beach, FL 33484-6635

TITLE VPD ☒ Change ☐ Addition

NAME COFIELD, RHONDA  
STREET ADDRESS 801 Sixth Street South  
CITY-ST-ZIP St. Petersburg, FL 33701

TITLE PD ☒ Change ☐ Addition

NAME COFIELD, RHONDA  
STREET ADDRESS 801 Sixth Street South  
CITY-ST-ZIP St. Petersburg, FL 33701

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: *Mary J. Kaufman*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561-  
4/18/00 335-7100 ext 4320  
Date Daytime Phone #

CR2E037 (9/99)