2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State
03-15-2001 90177 002 ****70.00

DOCUMENT # N40855

1. Entity Name

UNITED CEREBRAL PALSY OF PALM BEACH & MID-COAST

Principal Place of Business	Mailing Address
3030 S. DIXIE HWY STE. 15 W PALM BCH FL 33409 US	3117 SW 13 CT FT LAUDERDALE FL 33312 US

35666

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3595 2 AVE NORTH	
Suite, Apt. #, etc.: WLA	Suite, Apt. #, etc.
City & State: LAKEWORTH, FL	City & State
Zip: 33461 Country: U.S.A.	Zip Country

4. FEI Number 65-0229776 ☐ 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
ANIELLO, JOSEPH 1411 N.W. 14TH AVENUE MIAMI FL 33125	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 _____
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	CD BLANZ, REGINA 4400 W. SAMPLE ROAD #142 COCONUT CREEK FL	☐ Delete	S.D. BLANZ, REGINA 4400 W. SAMPLE RD. #142 COCONUT CREEK, FL 33073	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MCGINNIS, TOM 1400 CARANDIS CIR W PALM BCH FL	☒ Delete	C.D. BENSWICK, NORMAN 441 N.W. 12TH AVENUE DEERFIELD BCH, FL 33442	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ZIMMERMAN, JEAN PO BOX 3086 NA TEQUESTA FL	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PM ANIELLO, JOSEPH 1411 N.W. 14TH AVENUE MIAMI FL 33125	☐ Delete	P.D. ANIELLO, JOSEPH 1411 N.W. 14 AVE MIAMI, FL 33125	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LAYMAN, KATHY PO BOX 24703 W. PALM BEACH FL	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MAHONEY, JAMES H 777 S FLAGER DR #700 WEST PALM BEACH FL	☒ Delete		☐ Change ☐ Addition

CR2E037 (10/00)

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: SIGNATURE REQUIRED 2/26/01 (305) 325-1080
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #