

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

**FILED**  
**Feb 06, 2003 8:00 am**  
**Secretary of State**

02-06-2003 90120 041 \*\*\*\*61.25

**DOCUMENT # N44081**

1. Entity Name  
**PALM BEACH FIN DIVERS, INC.**



Principal Place of Business

**991 MOHAWK ST  
JUPITER FL 33458  
US**

Mailing Address

**P.O. BOX 33238  
PALM BEACH GARDENS FL 33420**

**40008105**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0245384**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

**AUGER, ALLEN  
5527 ETON COURT  
BOCA RATON FL 33486**

Name

**Beth Tilley**

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

**991 Mohhawk St**

City

**Jupiter**

**FL**

Zip Code  
**33458**

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 **Beth Tilley President**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**1/29/03**

**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>AUGER, ALLEN</b> <b>5527 ETON COURT</b> <b>BOCA RATON FL 33486</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>TILLEY, BETH</b> <b>991 MOHAWK ST</b> <b>JUPITER FL 33458</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HOLLUM, TIM</b> <b>17 LAKE ARBOR DR</b> <b>PALM SPRINGS FL 33461</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE VP NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Jack Thygesen</b> <b>6022 Roger St</b> <b>Jupiter, FL 33458</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE PRES NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE SEC NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Hazel Marsha</b> <b>3900 County Line Rd</b> <b>Tequesta FL</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE TREAS NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Sherry Pearsall</b> <b>217 W Whitney Dr</b> <b>Jupiter FL 33458</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input 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:

**Sherry Pearsall**

**1/30/03**

**561 575 1977**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)