

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N47433

1. Entity Name

PALM BEACH MACINTOSH USER GROUP, INC.

FILED
Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90093 028 ****61.25

Principal Place of Business

Mailing Address

P. O. BOX 21122
WEST PALM BEACH FL 33416

P.O. BOX 21122
WEST PALM BEACH FL 33416-1122
US

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

65-0319543

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

STANDER, BILL
7699 E COUNTRY CLUB BLVD
BOCA RATON FL 33397

Name

ANDREW E. MAGIDSON

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

5190 LAS VERDES CIR

City

DELRAY BEACH

FL

Zip Code

33484

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

Andrew E. Magidson

ANDREW E. MAGIDSON, SECRETARY 1/25/00

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	Delete
TD	EMALEE, ANDRE	11974 S EDGEWATER DR	PBG FL 33410	<input checked="" type="checkbox"/>
SD	TERRIAULT, ARDEN	229 RIDGE ROAD	JUPITER FL 33477	<input checked="" type="checkbox"/>
VPD	LASEY, THOMAS J III	6279-3 RIVER WALK LANE	JUPITER FL 33458	<input checked="" type="checkbox"/>
PD	STANDER, BILL	7699 E COUNTRY CLUB BLVD	BOCA RATON FL 33487-1714	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
P/D	MICHAEL J PROCISE	3302 INLET HARBOUR	STUART, FL 34996	<input type="checkbox"/>	<input checked="" type="checkbox"/>
V/D	NORMAN E ARGUS	1354 E LIBBY DR	WEST PALM BEACH FL 33406	<input type="checkbox"/>	<input checked="" type="checkbox"/>
S/D	ANDREW E. MAGIDSON	5190 LAS VERDES CIR	DELRAY BEACH FL 33484	<input type="checkbox"/>	<input checked="" type="checkbox"/>
T/D	AARON EDDY SINGER	6763 Moonlit Dr	DeLray Beach FL 33446	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MIKE PROCISE 1/25/00 561-220-4240

Date

Daytime Phone #

CR2E037 (9/99)