2001 UNIFORM	BUSINESS REPORT (UBR)
DOCUMENT # N49	9712
GREATER NORTHERN PALM	M BEACH CHAPTER #4736 OF AME
Principal Place of Business	Mailing Address
3602 LAKEMONT CT.	3602 LAKEMONT CT.

WEST PALM BEACH FL 33410

FILED
May 15, 2001 8:00 am
Secretary of State
05-15-2001 90032 002 ****61.25

974849

· ·				 					
2. Principal Pi	lace of Business Fuschia Gécle North	3. Mailing Address 4361 Juschia (Ende No	rth				 	
Suite, Apt. #, etc. Suite, Apt. #, etc.			-0 -0, 100			DO NOT WRIT	E IN THIS SPACE		
City & State	City & State Gardens 71. Palm Beach Garden			u	4. FEI Number 52-1758846 Applied For Not Applicable				
Zip	V1 C		Country USA	5. Certificate of		of Status Desired	□ \$8.75 /	Additional	
33410	- 6. Name and Address of Current Re	<u> 33410 </u>			7. Name and	Address of New Re	Fee Requ	red	
	O. Hanne dila Addicas of Carroll III	-gioto-ou ngoit	Name						
			Street A	Street Address (P.O. Box Number is Not Acceptable)					
Daniels, 336 Gulf				and the second of the second o					
#910	VIEW DR								
NORTH PALM BEACH FL 33408			City				FL Zip C	ode	
8. The above	named entity submits this statement for t	he purpose of changing its re	egistered office o	r registere	ed agent, or both	n, in the state of Flor	rida.		
		, .							
SIGNATURE _	Signature, typed or printed name of registered agent and	1 title if applicable. (NOTE:	Registered Agent signat	ture required v	when reinstating)		DATE		
			 	- "			······		
FILE NOW: 9. Election Campaign Finance			. —		О Мау Ве		Check Payable	l l	
	FEE IS \$61.25	Trust Fund Contribut	tion.	Added	to Fees	Dep	partment of State	'	
10.	OFFICERS AND DIRE	CTORS	11.	Ā	DDITIONS/CHA	NGES TO OFFICER	RS AND DIRECTORS	IN 10	
TITLE	PD	☐ Delete	TITLE	PP	ما مريان	1	⊡ Chang	e 🔲 Addition	
NAME	GIANASI, CHARLES A MD		NAME	1 7 0		MIRER			
STREET ADDRESS :	340 AUSTRALIAN CIRCLE LAKE PARK FL 33403		STREET ADDRESS CITY-ST-ZIP	Pal	58 GU m Keled		no 72,33	140	
TITLE	VPD	☐ Delete	TITLE	VPI		'	☑ Chang		
NAME	FREEMAN, Z		NAME	-	Schu	ntz m			
STREET ADDRESS	439 DATE PALM DRIVE		STREET ADDRESS	112	11 AVE	of 160	4	33418	
CITY-ST-ZIP	LAKE PARK FL 33403		CITY-ST-ZIP	50	alm Ge	a chibar	∰ Chang		
TITLE NAME	sd Forsyth, ethel	☐ Delete	TITLE NAME	EDI	NASti	weel.			
STREET ADDRESS	1203 SUN TERRACE CT.		STREET ADDRESS	1/36	8 7us		de North	33410	
CITY-ST-ZIP	PALM BEACH GARDENS FL 3340	3	CITY-ST-ZIP	Yar	em pe		dens H		
TITLE	TD VEET AND VEET !	☐ Delete	TITLE	α_{T}	1 (-5	K	Change Ch	e 🗌 Addition	
NAME STREET ADDRESS	VREELAND, KEITH 14614 TANGELO BLVD		NAME STREET ADDRESS	Parc		- circl	North	2241	
CITY-ST-ZIP	WEST PALM BEACH FL 33463		CITY-ST-ZIP	the	m Beac	ha Cal	idens the	3340	
TITLE	D	☐ Delete	TITLE	DAL	41772	, ware	Chang	e Addition	
NAME	DANIELS, BRUCE		NAME	336	, oulf	View D.			
STREET ADDRESS CITY-ST-ZIP	336 GULFVIEW DRIVE #1018 NORTH PALM BEACH FL		STREET ADDRESS CITY-ST-ZIP	Dou	our Pal	m Beach	4 72.334	108	
TITLE	D	Delete	TITLE	200	2 000 4	aharo	D ∩ □ Chang	e 🔲 Addition	
NAME	ADOLPH, JAY	_ Dollar	NAME	34	Auste	a lianc	role Chang		
STREET ADDRESS	10690 AVENEU J		STREET ADDRESS	1-1	10 D.	ak ol	33 4nz	{	
CITY-ST-ZIP	PALM BEACH GARDENS FL		CITY-ST-ZIP	1-1+1	- L ru	KN ,4K	J 19		

12. I hereby certify that the information supplied with this filling 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:

3602 LAKEMONT CT.

WEST PALM BEACH FL 33410

561-627-2598