

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 25, 2001 8:00 am
Secretary of State

01-25-2001 90262 011 ****61.25

DOCUMENT # N92000000285

1. Entity Name

THE MARY ANN AND HAROLD PERPER FOUNDATION, INC.

Principal Place of Business

Mailing Address

47 ST THOMAS DR
 PALM BEACH GARDENS FL 33418
 US

47 ST THOMAS DR
 PALM BEACH GARDENS FL 33418
 US

ADD10544

2. Principal Place of Business

3. Mailing Address

331 SE 9th Lane
 Suite, Apt. #, etc.

331 SE 9th Lane
 Suite, Apt. #, etc.

City & State

Boca Raton, Fl.

City & State

Boca Raton, Fl.

4. FEI Number

65-0370994

Applied For

Not Applicable

Zip

33432

Country

U.S.A.

Zip

33432

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PERPER, HAROLD E
 47 ST THOMAS DR
 PALM BEACH GARDENS FL 33418

Name

PERPER, HAROLD E.

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

331 S.E. 9th Lane

City

Boca Raton

FL

Zip Code
 33432

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

Harold E. Perper

HAROLD E. PERPER

1-13-01

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 PD
 NAME PERPER, HAROLD E
 STREET ADDRESS 47 ST THOMAS DR
 CITY-ST-ZIP PALM BEACH GARDENS FL 33418 ☐ Delete

TITLE PD
 NAME PERPER, HAROLD E.
 STREET ADDRESS 331 S.E. 9th Lane
 CITY-ST-ZIP Boca Raton, Fl. 33432 ☒ Change ☐ Addition

TITLE VPD
 NAME RAFFERTY, CATHERINE, M
 STREET ADDRESS 4730 MASS. AVE. N.W.
 CITY-ST-ZIP WASHINGTON DC 20016 ☐ Delete

TITLE VPD
 NAME RAFFERTY, CATHERINE M.
 STREET ADDRESS 4400 48th St. N.W.
 CITY-ST-ZIP Washington, D.C. 20016 ☒ Change ☐ Addition

TITLE STD
 NAME PERPER, MARY A
 STREET ADDRESS 47 ST THOMAS DR
 CITY-ST-ZIP PALM BEACH GARDENS FL 33418 ☐ Delete

TITLE STD
 NAME PERPER, MARY A.
 STREET ADDRESS 331 S.E. 9th Lane
 CITY-ST-ZIP Boca Raton, Fl. 33432 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ 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:

Harold E. Perper

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-13-01
 1-13-01

561 368 9101

CR2E037 (10/00)