**NONPROFIT** CORPORATION **ANNUAL REPORT** 

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N93000003235

1. Corporation Name THE PEARL BARLOW FOUNDATION, INC.						143/21 - 90038 - 9			
Principal Place of Business  340 ROYAL PALM WAY STE 100 STE 100 PALM BEAHC FL 33480 US  Mailing Address  340 ROYAL PALM WAY STE 100 STE 100 PALM BEAHC FL 33480 US									
Principal Place of Business     2a. Mailing Address			_			3. Date Incorporated or Qualifed			
21 26						07/19/1993		lied For	
Suite, Apt. #, etc. Suite, Apt. #, etc						4. FEI Number 65-0428322	1 1 1 1 1 1 1	Applicable	
22 27 City & State City & State							\$8.75 A		
`	28				5. Certificate of Status Desired	Fee Rec			
Zip	Country Zip			ry		6. Election Campaign Financing	\$5.00 N	May Be	
24	25 29 30					Trust Fund Contribution	Added to	- 1	
	9. Name and Address of Current		<u>'                                    </u>			10. Name and Address of New Registere	d Agent		
				31	Name				
MURPHY, EUGENE W JR				32	Street Add	ress (P.O. Box Number is Not Acceptable)			
340 ROYAL PALM WAY						,			
SUITE 100				33		•			
PALM BEACH FL 33480				34	City		. 85 Zip C	ode	
					•	F	L   [		
l office or r	egistered agent, or both, in the State on the state of the state of the state of the obligation of the state of the obligation of the state of the s	of Florida. Such change was a cons of, Section 617.0503, Flo	orida Statut	es.	ne corporati	poration submits this statement for the purpose on's board of directors. I hereby accept the appropriate the purpose of the pu	ointment as reg	istered	
42	Signature, typed or printed name of registered agent		E: Registered A	gent :	signature require	ed when reinstating)  ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12	
12.	OF FICERO AND BIRECTORS					7.001110107077	. Change	Addition	
TITLE	<u> </u>							_	
NAME	DAILOW, I CANE		1	1.2 NAME 1.3 STREET ADDRESS					
STREET ADDRESS	ss 6460 COMMON CIRCLE 2-203 WEST PALM BEACH FL 33417-4271			-ST-					
CITY-ST-ZIP TITLE				<u>-31-</u> E	ZIF		Change	☐ Addition	
	_	<u></u>	2.2 NAW						
NAME	DIODEINON, UNINEO				ADDRESS				
STREET ADDRESS					-ZIP		د چیرسنسست ک		
CITY-ST-ZIP				3.1 TITLE			☐ Change	Addition	
NAME	<del></del>			Æ				1	
STREET ADORESS	THE BOYLL DAILL WAY OUTT 400			EET/	ADORESS	•			
CITY-ST-ZIP				3.4, CITY-ST-ZIP					
TITLE	□ DELETE			4.1 TITLE			☐ Change	Addition	
NAME			4. 2 NAJ	ME					
STREET ADDRESS			4.3 STR	EET A	ADDRESS				
CITY-ST-ZIP	4.4		4.4 CITY	/-ST-	ZIP				
TITLE	☐ DELETE 5.1 T		5.1 TITL				☐ Change	Addition	
NAME			5.2 NAM			\ \ <b>\</b> \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		·	
STREET ADDRESS					ADDRESS	/ " EGA.			
CITY-ST-ZIP			5.4 CIT			A - /	Пс:	· · · · · · · · · · · · · · · · · · ·	
TITLE		☐ DELETE	6.1 TITL			Bres Bankary	Change	Addition	
) MALUE	1		6.2 NAA	4E		Jean Haway			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0 (1914). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the large 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered. CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

SIGNATURE REQUIRED

**FILED** 

03-02-1999 90038 009 \*\*\*\*61.25

Mar 02, 1999 8:00 am § Secretary of State