

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N93000003582**

1. Entity Name

FOUNDATION FOR THE ADVANCEMENT OF MESOAMERICAN STUDIES, INC.

Principal Place of Business

**268 SOUTH SUNCOAST BLVD
CRYSTAL RIVER FL 34429**

Mailing Address

**268 SOUTH SUNCOAST BLVD
CRYSTAL RIVER FL 34429**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3195520

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET, SUITE 105
TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name

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

1201 Hays Street, Suite 105

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees****Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DCP
RANIERI, LEWIS S.
225 N. HEWLETT AVENUE
MERRICK NY** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVP
RANIERI, MARGARET
225 N. HEWLETT AVENUE
MERRICK NY** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GOLDSTEIN, MARILYN DR.
259 SCHENCK AVENUE
GREAT NECK NY** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
BARBERA, ELIZABETH
1736 DANNET PLACE
EAST MEADOW NY 11554** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
NOBLE, SANDRA DR
10976 COVE HARBOR DRIVE
CRYSTAL RIVER FL 34428** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
REENTS-BUDET, DORIE
2211 MEADE LANE
DURHAM NC 27707** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Kerr, Barbara
14 West 17th Street, Apt. 2S
New York, NY 10011** ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Kerr, Justin
14 West 17th Street, Apt. 2S
New York, NY 10011** ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Diehl, Dick
1214 Wakefield Drive
Tuscaloosa, AL 35405** ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EDS
Noble, Sandra Dr.
10976 Cove Harbor Drive
Crystal River FL 34428** ☒ Change ☐ AdditionTITLE
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:

Elizabeth Barbera**Elizabeth Barbera****4/05/02****(516) 745-6644**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Treasurer)

Date

Daytime Phone #

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90118 016 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)