2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 am
Secretary of State
04-30-2002 90220 012 ****61.25

DOCUMENT # N93000003789

1. Entity Name

PALM BEACH COUNTY EXTENSION OVERALL ADVISORY COMMITTEE, INC.

Principal Place of Business	Mailing Address
C/O AGRICULTURAL SERVICES CENTER 559 N. MILITARY TRAIL WEST PALM BEACH FL 33415	C/O AGRICULTURAL SERVICES CENTER 559 N. MILITARY TRAIL WEST PALM BEACH FL 33415

DO NOT WRITE IN THIS SPACE

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 NOT APPLICABLE ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HUTCHESON, CLAYTON E
559 N. MILITARY TRAIL
WEST PALM BEACH FL 33415

7. Name and Address of New Registered Agent

Name

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

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 $61.25

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	F GRAHAM, MIKE 5151 NORTHLAKE BLVD PALM BEACH GARDEN FL 33418	☐ Delete	D ELIZABETH DOWDLE 224 DATURA ST, SUITE 208 WEST PALM BEACH FL 33401	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SCHOECH, CHARLES ESQ P.O. BOX 2775 N/A PALM BEACH FL 33480-2775	☐ Delete	D ROSA DURANDO 10308 HERITAGE FARMS ROAD LAKE WORTH FL 33467-6720	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEITBOVIT, ART 232-A ROYAL PALM WAY PALM BEACH FL 33480	☐ Delete	D SUSAN KOEBEL 1290 SNOWBELL PLACE WELLINGTON FL 33414	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHAMBLEE, SANDRA 1045 TABIT RD BELLE GLADE FL 33430	☐ Delete	D DR RAUL PERDOMO PO BOX 86 SOUTH BAY FL 33493	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LESLIE CLARKE 2929 WINDING OAKS LANE WELLINGTON FL 33414	☐ Delete ADDITION	D JIM SHINE PO BOX 666 BELLE GLADE FL 33430	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DIGNA DAVIS 612 SIXTH TERRACE PALM BEACH GARDENS FL 33418	☐ Delete ADDITION		☐ Change	☐ Addition

CR2E037 (9/01)

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 4-16-2002 561-655-0620
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #