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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000005021

1. Corporation Name:

THE PROFESSIONAL AND BUSINESS FORUM, INC.

Principal Place of Business

6205 WOOD LAKE ROAD
JUPITER FL 33458

Mailing Address

PO BOX 2437
WEST PALM BEACH FL 33402
US

454981 - 90032 - 44



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

10/07/1994

4. FEI Number

65-0526980

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

SHERMAN, HEIDI
6205 WOOD LAKE ROAD
JUPITER FL 33458

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME CHAMBERLIN, ILSE
STREET ADDRESS 3502 MARIGOLD CT, #212
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE SD ☐ DELETE

NAME DEYERMOND, JEAN
STREET ADDRESS 1110 DEAR ISLAND DRIVE
CITY-ST-ZIP WEST PALM BEACH FL 33409

TITLE D ☒ DELETE

NAME ROMANOS, WILLIAM J DR
STREET ADDRESS 900 S US HIGHWAY 1 SUITE 101
CITY-ST-ZIP JUPITER FL

TITLE D ☐ DELETE

NAME SHERMAN, HEIDI
STREET ADDRESS 6205 WOOD LAKE RD
CITY-ST-ZIP JUPITER FL 33458

TITLE TD ☒ DELETE

NAME RMOANOS, WILLIAM J DR
STREET ADDRESS 9005 US HIGHWAY 1, STE 101
CITY-ST-ZIP JUPITER FL 33477

TITLE VD ☐ DELETE

NAME SHERMAN, R SCOTT
STREET ADDRESS 6205 WOOD LAKE RD
CITY-ST-ZIP JUPITER FL 33458

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V/D ☐ Change ☒ Addition

1.2 NAME Horniman, Jack L.
1.3 STREET ADDRESS 304 Golfview Road #403E
1.4 CITY-ST-ZIP North Palm Beach, FL 33408

2.1 TITLE P/D ☒ Change ☐ Addition

2.2 NAME Deyermund, Jean
2.3 STREET ADDRESS 1110 Bear Island Drive
2.4 CITY-ST-ZIP West Palm Beach, FL 33409

3.1 TITLE ~~Cotter, Richard~~ ☐ Change ☒ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE D ☐ Change ☒ Addition

5.2 NAME Cullen, Richard
5.3 STREET ADDRESS 6644 PATIO LANE
5.4 CITY-ST-ZIP BOCA RATON, FL 33433

6.1 TITLE S/D ☒ Change ☐ Addition

6.2 NAME Sherman, R. Scott
6.3 STREET ADDRESS 6205 Wood Lake Rd.
6.4 CITY-ST-ZIP Jupiter, FL 33458

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Heidi Sherman

4/22/99

561 745-9143

CR2E037 (11/98)