

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2002 8:00 am
Secretary of State

04-18-2002 90422 009 ****61.25

DOCUMENT # N95000002157

1. Entity Name

BOCA RATON PILOTS ASSOCIATION SCHOLARSHIP FUND, INC.

Principal Place of Business

Mailing Address

1521 NW 13TH AVENUE
 BOCA RATON FL 33486-1218
 US

1521 NW 13TH AVENUE
 BOCA RATON FL 33486-1218
 US

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

65-0580395

Applied For

Not Applicable

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

CHRUSCH, MICHAEL J
 1521 NW 13TH AVE
 BOCA RATON FL 33486

Name **HERBERT N. HAAR**
 Street Address (P.O. Box Number is Not Acceptable) **10439 Stone Bridge Blvd**
Boca Raton, FL 33498
 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

Herbert N. Haar, Secy

4-5-02

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 **D** ☐ Delete
 NAME **WHITTLE, HARRY**
 STREET ADDRESS **1239 NW 16TH STREET**
 CITY-ST-ZIP **BOCA RATON FL 33486**

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

TITLE **DT** ☐ Delete
 NAME **HAAR, HERBERT N**
 STREET ADDRESS **10439 STONEBRIDGE BOULEVARD**
 CITY-ST-ZIP **BOCA RATON FL 33498**

TITLE ☐ Change ☐ Addition
 NAME **HAAR, Herbert N.**
 STREET ADDRESS **Director, Secretary and Treasurer**
 CITY-ST-ZIP

TITLE **VD** ☐ Delete
 NAME **MACDONALD, PERCY**
 STREET ADDRESS **2677 S OCEAN BLVD**
 CITY-ST-ZIP **BOCA RATON FL**

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

TITLE **CPD** ☐ Delete
 NAME **CHRUSCH, MICHAEL**
 STREET ADDRESS **1521 NW 13TH AVENUE**
 CITY-ST-ZIP **BOCA RATON FL 33486**

TITLE ☐ Change ☐ Addition
 NAME **Directors (D) only**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☒ Delete
 NAME **MORGENSTEIN, CHARLES**
 STREET ADDRESS **1761 W HILLSBORO BLVD STE 328**
 CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

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

TITLE **DC** ☐ Delete
 NAME **CHRUSCH, PETER**
 STREET ADDRESS **1521 NW 13TH AVENUE**
 CITY-ST-ZIP **BOCA RATON FL 33486**

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

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:

Herbert N. Haar **Herbert N. Haar**

4-4-02

561 487-6390

CR2E037 (9/01)