

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000005839

1. Entity Name

THE ROBERT A. DOWLING FOUNDATION, INC.

Principal Place of Business

Mailing Address

C/O BUTZEL LONG
1200 N. FEDERAL HIGHWAY SUITE 420
BOCA RATON FL 33432

C/O BUTZEL LONG
1200 N. FEDERAL HIGHWAY SUITE 420
BOCA RATON FL 33432

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

65-0641756

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FORBES, PHILIP H
1200 N. FEDERAL HIGHWAY
SUITE 420
BOCA RATON FL 33432

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 PD
NAME DOWLING, ROBERT A
STREET ADDRESS 3001 COUNTRY CLUB BLVD. APT. 511
CITY-ST-ZIP DEERFIELD BEACH FL 33442 ☐ Delete

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

TITLE D
NAME THOMAS, WAYNE S
STREET ADDRESS PATELCO, BOX 240
CITY-ST-ZIP ROTTERDAM JCT. NY 12150-0249 ☐ Delete

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

TITLE STD
NAME RAYMOND, JOHN J JR
STREET ADDRESS 1200 N FEDERAL HWY SUITE 420
CITY-ST-ZIP BOCA RATON FL 33432 ☐ Delete

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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:

ROBERT A. DOWLING

04-8-02

Date

Daytime Phone #

CR2E037 (9/01)

0034943

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90660 025 ****61.25



DO NOT WRITE IN THIS SPACE