

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000006003

1. Entity Name

PALM TRAN, INC.



FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90224 047 ****61.25

Principal Place of Business

301 NORTH OLIVE AVE., STE. 1101
WEST PALM BEACH FL 33401

Mailing Address

3201 ELECTRONICS WAY
WEST PALM BEACH FL 33407

80014504



☐ CHECK HERE IF MAKING CHANGES

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 65-0627086

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MAULL, PERRY J

3201 ELECTRONICS WAY

EXECUTIVE DIRECTOR

WEST PALM BEACH FL 33407-4618

7. Name and Address of New Registered Agent

Name

Street Address (R.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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME WEISMAN, ROBERT
STREET ADDRESS 301 NORTH OLIVE AVE 12TH FL
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Delete

TITLE D
NAME AARONSON, BURT
STREET ADDRESS 301 NORTH OLIVE AVE., 12TH FL
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Delete

TITLE D
NAME MARCUS, KAREN T
STREET ADDRESS 301 NORTH OLIVE AVE., 12TH FL
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Delete

TITLE D
NAME ROBERTS, CAROL A
STREET ADDRESS 301 NORTH OLIVE AVE., 12TH FL
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☒ Delete

TITLE D
NAME NEWELL, WARREN H
STREET ADDRESS 301 NORTH OLIVE AVE., 12TH FL
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Delete

TITLE D
NAME MCCARTY, MARY
STREET ADDRESS 301 NORTH OLIVE AVE., 12TH FL
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Director
NAME Jeff Koons
STREET ADDRESS 301 North Olive Ave., 12th FL
CITY-ST-ZIP West Palm Beach FL 33401 ☒ Change ☐ Addition

TITLE D
NAME Tony Masilotti
STREET ADDRESS 301 North Olive Ave., 12th FL
CITY-ST-ZIP West Palm Beach, FL 33401 ☐ Change ☒ Addition

TITLE D
NAME Addie L. Greene
STREET ADDRESS 301 North Olive Ave., 12th FL
CITY-ST-ZIP West Palm Beach, FL 33401 ☐ Change ☒ Addition

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

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

TITLE
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 life empowered.

SIGNATURE:

[Signature]

1/9/03

561-255-2712

CR2E037 (10/02)