

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000000697

1. Entity Name

SCIENCE AND TECHNOLOGY ADVISORY GROUP FOUNDATION

FILED
Mar 01, 2000 8:00 am
Secretary of State

03-01-2000 90082 007 ****61.25

Principal Place of Business

Mailing Address

11254 BOCA WOODS LANE
 BOCA RATON FL 33428
 US

11254 BOCA WOODS LANE
 BOCA RATON FL 33428-1838
 US

00007000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0639368

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SUNSHINE, LAWRENCE
 19890 STOCKHOLM DRIVE
 BOCA RATON FL 33434

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 ☐ Delete
 NAME D
 STREET ADDRESS SUNSHINE, LAWRENCE
 CITY-ST-ZIP 19890 STOCKHOLM DRIVE
 BOCA RATON FL 33434

TITLE ☐ Change ☒ Addition
 NAME CHAIRMAN C
 STREET ADDRESS HAROLD LARKIN
 CITY-ST-ZIP 1400 S. OCEAN BLVD #N1405
 BOCA RATON, FL, 33432

TITLE ☐ Delete
 NAME D
 STREET ADDRESS SHORE, DAVID
 CITY-ST-ZIP 11145 BOCAWOODS LANE
 BOCA RATON FL 33428

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

TITLE ☐ Delete
 NAME D
 STREET ADDRESS GORDON, SAUL
 CITY-ST-ZIP 3481 VIA ROSA
 BOCA RATON FL 33433

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

TITLE ☐ Delete
 NAME P PITKIN,
 STREET ADDRESS PISKIN, MARVIN
 CITY-ST-ZIP 11254 BOCA WOODS LANE
 BOCA RATON FL 33428

TITLE ☒ Change ☐ Addition
 NAME P PITKIN, MARVIN
 STREET ADDRESS 11254 BOCAWOODS LANE
 CITY-ST-ZIP BOCA RATON, FL, 33428

TITLE ☐ Delete
 NAME D
 STREET ADDRESS SALUS, SYDNEY G
 CITY-ST-ZIP 1155 RTE A1A, #107
 HILLSBORO BEACH FL 33062

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

TITLE ☐ Delete
 NAME D
 STREET ADDRESS REIDER, DANIEL
 CITY-ST-ZIP 6504 VIA ROSA
 BOCA RATON FL 33433

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:

MARVIN PITKIN, MARVIN PITKIN

20 FEB 2000 (561) 488-3699

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)