

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

FILED
May 16, 2003 8:00 am
Secretary of State

05-16-2003 90184 008 ****61.25

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DOCUMENT # N96000005671

1. Entity Name

~~A SCHOOL FOR PERSONAL ENRICHMENT, INC.~~

A SCHOOL FOR PERSONAL ENRICHMENT, INC.



Principal Place of Business

931 VILLAGE BOULEVARD
(905-308)
WEST PALM BEACH FL 33407-1939

Mailing Address

931 VILLAGE BOULEVARD
(905-308)
WEST PALM BEACH FL 33407-1939

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number NOT APPLICABLE

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

GREGORY, ALAN
931 VILLAGE BOULEVARD
(905-308)
WEST PALM BEACH FL 33407-1939

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. 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME GREGORY, ALAN
STREET ADDRESS 931 VILLAGE BOULEVARD, SUITE 905-308
CITY-ST-ZIP WEST PALM BEACH FL 33407-1939

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

TITLE D ☐ Delete
NAME PRIBRAM, KARL
STREET ADDRESS 197 MAIN STREET
CITY-ST-ZIP WARRENTON VA 20186

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

TITLE D ☐ Delete
NAME GREGORY, LUCY
STREET ADDRESS 931 VILLAGE BOULEVARD, SUITE 905-308
CITY-ST-ZIP WEST PALM BEACH FL 33407-1939

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

TITLE D ☐ Delete
NAME PARKS, PERRY
STREET ADDRESS 1017 ALVIRA STREET
CITY-ST-ZIP LOS ANGELES CA 90035

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

TITLE D ☐ Delete
NAME WIENER, ISAAC
STREET ADDRESS 10 SALEM ROAD
CITY-ST-ZIP WAYNE NJ 07470

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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 I's empowered.

SIGNATURE:

Signature: *Alan Gregory* PRES. 1/05/03 561-840-9370

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #

CR2E037 (10/02)



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 16, 2003

A SCHOOL FOR PERSONAL ENRICHMENT, INC.
931 VILLAGE BOULEVARD
(905-308)
WEST PALM BEACH, FL 33407-1939

SUBJECT: A SCHOOL FOR PERSONAL ENRICHMENT, INC.
Ref. Number: N96000005671

We have received your document for A SCHOOL FOR PERSONAL ENRICHMENT, INC. and check(s) totaling \$61.25. However, your check(s) and document are being returned for the following:

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers
Document Specialist

Letter Number: 303A00022774

Mail return receipt requested @