

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2002 8:00 am
Secretary of State

02-11-2002 90127 028 ****61.25

DOCUMENT # N97000001021

1. Entity Name

PREVENT A LITTER SOCIETY (P.A.L.S.), INC.

Principal Place of Business

Mailing Address

**PO BOX 5135
ST AUGUSTINE FL 32085**

**PO BOX 5135
ST AUGUSTINE FL 32085**

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

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

**BURBANK-HARRELL, DOROTHY
5187 FARM CREEK RD
SAINT AUGUSTINE FL 32092**

*(moved out of
state)*

Name **HUNTER L. BARNETT**

Street Address (P.O. Box Number is Not Acceptable)

4742 KERLE STREET

City **JACKSONVILLE, FL** FL Zip Code **32205**

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

Hunter L. Barnett

HUNTER L. BARNETT

1/27/02

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

TITLE **BM** ☒ Delete
NAME **MULL, SHARON**
STREET ADDRESS **140 RONALD ROAD**
CITY-ST-ZIP **ST. AUGUSTINE FL 32095**

TITLE **T** ☒ Delete
NAME **HARRELL, DOROTHY**
STREET ADDRESS **5187 FARM CREEK RD**
CITY-ST-ZIP **ST. AUGUSTINE FL 32095**

TITLE **SECRETARY** ☒ Delete
NAME **BARNETT, HUNTER** **D**
STREET ADDRESS **4742 KERLE ST**
CITY-ST-ZIP **JACKSONVILLE FL 32205-4904**

TITLE **VP** ☐ Delete
NAME **BOLY, EDA** **D**
STREET ADDRESS **510 12TH ST NORTH BEACH**
CITY-ST-ZIP **ST AUGUSTINE FL 32095**

TITLE **P** ☐ Delete
NAME **GILMORE, GAIL** **D**
STREET ADDRESS **13 THIRD STREET**
CITY-ST-ZIP **ST. AUGUSTINE FL 32084**

TITLE **D** ☒ Delete
NAME **GARNISS, BETTY**
STREET ADDRESS **603 GERONA AVE.**
CITY-ST-ZIP **ST. AUGUSTINE FL 32086**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **SECRETARY** ☐ Change ☒ Addition
NAME **AUCE DOMBROWIAK**
STREET ADDRESS **612 MARIPOSA ST.**
CITY-ST-ZIP **ST. AUGUSTINE, FL 32080**

TITLE **Treasurer** ☒ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ 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 like empowered.

SIGNATURE:

Hunter L. Barnett **HUNTER L. BARNETT**

1/27/01

904-389-3345

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)