

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jun 09, 2000 8:00 am  
Secretary of State

06-09-2000 90219 005 \*\*\*\*61.25

DOCUMENT #N970000001498 ✓

1. Entity Name

Palm Beach County Business Incubator, Inc.

Principal Place of Business

Mailing Address

1427 South Congress  
West Palm Beach  
FL 33406

c/o JEEckhaus, Chmn.  
3341 SW 15th Street  
Pompano Bch, FL 33069

2. Principal Place of Business

3. Mailing Address

See above  
Suite, Apt. #, etc.

see above  
Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

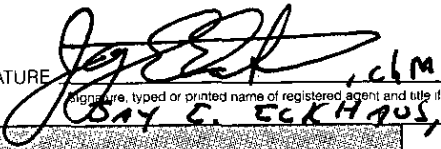
6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

David Fancher  
2727 Georgia Avenue  
West Palm Beach, FL 33405

Name - Jay E. Eckhaus  
Street Address (P.O. Box Number is Not Acceptable)  
3341 SW 15th Street  
City Pompano Beach FL Zip Code 33069

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.  
Jay E. Eckhaus, Chmn.

(NOTE: Registered Agent signature required when reinstating)

June 4, 2000  
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 NAME STREET ADDRESS CITY-ST-ZIP	PD Fancher, David	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Unruh, Hugo	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ChD Eckhaus, Jay 3341 SW 15th St, Pompano Bch 33069	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Harris-Lange, Janet 1001 West Jasmine Dr Lake Park, FL 33403	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT McClintock, Richard 218 Datura St West Palm Bch, FL 33401	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Gaster, Gordon 2000 PGA Blvd, Palm Bch Gardens, FL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hines, Gary 222 Lakeview Ave West Palm Beach, FL 33401	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Montgomery, Ken 600 S. Dixie Hwy West Palm Bch, FL 33401	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sapp, Ketly Blaise 1427 So. Congress W. Palm Beach, FL 33406	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hix, Jim 1427 So. Congress WEST Palm Bch, FL 33406	<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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: Jay E. Eckhaus, Chmn   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/4/00

x 235

954/979-0400

CR2E037 (9/99)