

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000004667

1. Entity Name

NOTARY CLUB OF BOCA RATON SUNRISE FOUNDATION, IN

C.

FILED
May 29, 2002 8:00 am
Secretary of State

05-29-2002 93644 035 ****61.25



DO NOT WRITE IN THIS SPACE

Principal Place of Business C/O W. SCHNAREL 901 MCLEARY STREET DELRAY BEACH FL 33483		Mailing Address C/O W. SCHNAREL 901 MCLEARY STREET DELRAY BEACH FL 33483	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0780118		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SCHNAREL, W. 901 MCLEARY STREET DELRAY BEACH FL 33483		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 DATE 5/16/02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROWAN, ED 100 N.E. 3RD AVENUE FT. LAUDERDALE FL 33301 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHARP, TIM 1698 S.W. 7TH AVENUE BOCA RATON FL 33486 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACFARLAND, RICH 2883 BANYAN BLVD. CIRCLE BOCA RATON FL 33431 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SCHNAREL, W. 901 MCLEARY STREET DELRAY BEACH FL 33483 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARBIERI, FRANK 21026 SHADY VISTA LANE BOCA RATON FL 33428 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEVE ALMAN 2363 N.W. 49th Lane BOCA RATON, FL 33431 ☐ Delete	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 like empowered.

SIGNATURE: DATE 5/16/02 561-789-3762

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/01)