

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

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90677 044 ****61.25

DOCUMENT # N98000002967

1. Entity Name

ROOSEVELT ESTATE SOUTH INC.



Principal Place of Business

**% WESTWARD ELEMENTARY
1101 GOLF AVENUE
WEST PALM BEACH FL 33401**

Mailing Address

**P.O. BOX 2842
WEST PALM BEACH FL 33402**

70029806



☐ CHECK HERE IF MAKING CHANGES

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 **65-0939356**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**STUBBS, MOSES B
1440 CROSS WAY
WEST PALM BEACH FL 33401**

7. Name and Address of New Registered Agent

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

Moses B. Stubbs Jr.
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	PD	<input type="checkbox"/> Delete
NAME	STUBBS, MOSES	
STREET ADDRESS	1440 CROSS WAY	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	KING, JULIA A	
STREET ADDRESS	1548 SIXTH STREET	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	S	<input type="checkbox"/> Delete
NAME	RICHARDSON, BOBBIE L	
STREET ADDRESS	1447 CROSS WAY	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	CS	<input type="checkbox"/> Delete
NAME	BOYNTON, GENEVA B	
STREET ADDRESS	1350 EIGHTH STREET	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	TD	<input type="checkbox"/> Delete
NAME	WITHERSPOON, JOSEPH	
STREET ADDRESS	1557 SIXTH STREET	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	P	<input type="checkbox"/> Delete
NAME	LITTLES, DORIS W	
STREET ADDRESS	1331 SIXTH STREET	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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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: *Joseph Witherspoon* **SIGNATURE REQUIRED** *Witherspoon* **MAKING 2003 (561) 932-7424**

CR2E037 (10/02)