

2000 UNIFORM BUSINESS REPORT (UBR)

8/2

FILED

Sep 19, 2000 8:00 am
Secretary of State

08-21-2000 90210 047 ****61.25

DOCUMENT # N98000003215

1. Entity Name

SUBSTITUTE TEACHER'S ASSOCIATION OF PALM BEACH C

Principal Place of Business

2644 FLAMINGO LAKE DRIVE
WEST PALM BEACH FL 33406

Mailing Address

2644 FLAMINGO LAKE DRIVE
WEST PALM BEACH FL 33406

2. Principal Place of Business

1363 Sailboat Circle

Suite, Apt. #, etc.

3. Mailing Address

1363 Sailboat Circle

Suite, Apt. #, etc.

City & State

Wellington, FL 33414

Zip

33414

Country

USA

City & State

Wellington, FL

Zip

33414

Country

USA

4. FEI Number

65-0856527

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FORREST, WILLIAM
2644 FLAMINGO LAKE DRIVE
WEST PALM BEACH FL 33406

7. Name and Address of New Registered Agent

Name: Kittredge, Karen

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

1363 Sailboat Circle

City: Wellington

FL

Zip Code

33414

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: *Karen Z. Kittredge*
Signature, typed or printed name of registered agent and title if applicable

KAREN Z. KITREDGE

8/10/00
Date

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

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: P
NAME: FORREST, WILLIAM F
STREET ADDRESS: 2644 FLAMINGO LAKE DRIVE
CITY-ST-ZIP: WEST PALM BEACH FL 33406 ☒ Delete

TITLE: VP
NAME: BIADASZ, PAUL
STREET ADDRESS: 767 DOGWOOD AVE
CITY-ST-ZIP: PALM BEACH GARDENS FL 33410 ☒ Delete

TITLE: D
NAME: GRANET, LYNN
STREET ADDRESS: 518 AZURE AVE
CITY-ST-ZIP: WELLINGTON FL 33414 ☐ Delete

TITLE: D
NAME: YEAGER, JOANNE
STREET ADDRESS: 11 ALLWICK RD
CITY-ST-ZIP: PALM BEACH GARDENS FL 33418 ☐ Delete

TITLE: D
NAME: MIRIZZI, LEN
STREET ADDRESS: 1605 S. US ONE, STE. 8B
CITY-ST-ZIP: JUPITER FL 33477 ☒ Delete

TITLE: D
NAME: HARPER, DOROTHY
STREET ADDRESS: 13057 MEADOW BREEZE DR
CITY-ST-ZIP: WELLINGTON FL 33414 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: P
NAME: Karen Kittredge
STREET ADDRESS: 1363 Sailboat Circle
CITY-ST-ZIP: Wellington, FL 33414 ☒ Change ☒ Addition

TITLE: D
NAME: Richard Bleckner
STREET ADDRESS: 1701 South Flagler Dr. # 1102
CITY-ST-ZIP: West Palm Beach, FL 33401 ☐ Change ☒ Addition

TITLE: D
NAME: Yeager, Joanne
STREET ADDRESS: 11 Allwick Road
CITY-ST-ZIP: Palm Beach Gardens, FL 33418 ☐ Change ☐ Addition

TITLE: D
NAME: Yeager, Joanne
STREET ADDRESS: 11 Allwick Road
CITY-ST-ZIP: Palm Beach Gardens, FL 33418 ☐ Change ☐ Addition

TITLE: D
NAME: Mirizzi, Len
STREET ADDRESS: 1605 S. US ONE, STE. 8B
CITY-ST-ZIP: Jupiter FL 33477 ☐ Change ☐ Addition

TITLE: D
NAME: Harper, Dorothy
STREET ADDRESS: 13057 Meadow Breeze Dr
CITY-ST-ZIP: Wellington FL 33414 ☐ 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:

Karen Z. Kittredge
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KAREN Z. KITREDGE

8/10/00
Date

Definite Phone #

CR2E037 (5/00)