

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 12, 2004 08:00 AM
Secretary of State

DOCUMENT # N98000004407

1. Entity Name

THE PERSPECTIVISM FOUNDATION, INC.



Principal Place of Business

2006 MAINSAIL CIR
JUPITER FL 33477-1418

Mailing Address

2006 MAINSAIL CIR
JUPITER FL 33477-1418

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

65-0854181

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KULUNAS, JOSEPH J ESQ.
250 AUSTRALIAN AVE S
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

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when consenting)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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

TITLE PD
NAME JACOBSON, JERRY IRVING DR.
STREET ADDRESS 2006 MAINSAIL CIR
CITY-ST-ZIP JUPITER FL 33477-1418 ☐ Delete

TITLE VD
NAME YAMANSKI, WILLIAM S
STREET ADDRESS 14550 MIDWEST BLVD
CITY-ST-ZIP EDMOND OK 73034 ☐ Delete

TITLE PCTS
NAME JACOBSON, JERRY I
STREET ADDRESS 2006 MAINSAIL CIR
CITY-ST-ZIP JUPITER FL 33477 ☐ Delete

TITLE VD
NAME MARTIN, PAUL
STREET ADDRESS 1785 WADE PATRICK ROAD
CITY-ST-ZIP BRAXTON MS 39044 ☐ Delete

TITLE VD
NAME GROSSMAN, HARVEY
STREET ADDRESS 8137 MIZNER LANE
CITY-ST-ZIP BOCA RATON FL 33433 ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
U000000086139
03/12/04-80012-009 61.25

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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:

Dr. Jerry Irving Jacobson Dr. Jerry Irving Jacobson 3/9/04