

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000005941

1. Entity Name

THE MULTI-AGENCY POLICE OFFICERS' BALL, INC.

FILED

Feb 24, 2002 8:00 am
Secretary of State

02-24-2002 90068 025 ****61.25

Principal Place of Business

Mailing Address

C/O CLARA MAYO
120 NORTH "G" STREET
LAKE WORTH FL 33460

C/O CLARA MAYO
120 NORTH "G" STREET
LAKE WORTH FL 33460

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

65-0885444

Applied For

Not Applicable

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

MAYO, CLARA
120 NORTH "G" STREET
LAKE WORTH FL 33460

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.

SIGNATURE MIA

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME MAYO, CLARA
STREET ADDRESS 120 NORTH "G" STREET
CITY-ST-ZIP LAKE WORTH FL 33460

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

TITLE VPD ☐ Delete
NAME MORAN, CHRIS
STREET ADDRESS 230 SUNSHINE RD
CITY-ST-ZIP WEST PALM BCH FL 33411

TITLE ☒ Change ☐ Addition
NAME Johansen, Chris
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☒ Delete
NAME IRONS, CARLA
STREET ADDRESS 210 N. MILITARY TRAIL
CITY-ST-ZIP JUPITER FL 33458

TITLE ☒ Change ☐ Addition
NAME LEARNER, JANE
STREET ADDRESS 560 US1
CITY-ST-ZIP NORTH PALM BEACH FL 33408

TITLE T ☒ Delete
NAME APICELLA, ARTHUR
STREET ADDRESS 2100 N. FLORIDA MANGO RD
CITY-ST-ZIP WEST PALM BEACH FL 33409

TITLE ☒ Change ☐ Addition
NAME MORGAN BRAWNER
STREET ADDRESS 10891 NORTH MILITARY TRAIL
CITY-ST-ZIP PALM BEACH GARDENS, FL 33410

TITLE VP ☐ Delete
NAME LOVEJOY, ELLEN
STREET ADDRESS 10500 N MILITARY TRAIL
CITY-ST-ZIP WEST PALM BEACH FL 33410

TITLE ☐ Change ☐ Addition
NAME Learner, Jan
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME ~~Learner, Jane~~
STREET ADDRESS ~~560 US1~~
CITY-ST-ZIP ~~NORTH PALM~~

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:

Jan Learner

2-7-02 3616277100

CR2E037 (9/01)