

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 15, 2004 8:00 am**  
**Secretary of State**

04-15-2004 90003 046 \*\*\*\*61.25

**DOCUMENT # N99000002226**

1. Entity Name  
**IBIS ADVISORY BOARD, INC.**



Principal Place of Business  
**8002 SANDHILL WAY EAST  
C/O IBIS GOLF & COUNTRY CLUB  
WEST PALM BEACH, FL 33412 US**

Mailing Address  
**8002 SANDHILL WAY EAST  
C/O IBIS GOLF & COUNTRY CLUB  
WEST PALM BEACH, FL 33412 US**

**54033355**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01232004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number  
**65-0990619**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

**LANGER, JOEL  
10445 TERRA LAGO DR.  
WEST PALM BEACH, FL 33412**

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 reinstating)

DATE

**Filing 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

T ☐ Delete  
NAME **LANGER, JOEL**  
STREET ADDRESS **10445 TERRA LAGO DR.**  
CITY-ST-ZIP **WEST PALM BEACH, FL 33412**

S ☒ Delete  
NAME **GOLUB, ELISABETH**  
STREET ADDRESS **7580 MONTE VERDE LANE**  
CITY-ST-ZIP **WEST PALM BEACH, FL 33412**

D ☒ Delete  
NAME **BODDIE, JOHN**  
STREET ADDRESS **10314 OSPREY TRACE**  
CITY-ST-ZIP **WEST PALM BEACH, FL 33412**

D ☐ Delete  
NAME **SCHWARTZ, STUART**  
STREET ADDRESS **7960 SANDHILL CT.**  
CITY-ST-ZIP **WEST PALM BEACH, FL 33412**

VP ☒ Delete  
NAME **FREDRICK, ROBERT**  
STREET ADDRESS **9064 LAKES BLVD**  
CITY-ST-ZIP **WEST PALM BEACH, FL 33412**

P ☒ Delete  
NAME **FRANK, TED**  
STREET ADDRESS **8964 LAKES BLVD**  
CITY-ST-ZIP **WEST PALM BEACH, FL 33412**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

☒ Change ☒ Addition  
TITLE **Secretary**  
NAME **Arthur Alexander**  
STREET ADDRESS **7590 Monte Verde Lane**  
CITY-ST-ZIP **West Palm Beach, FL 33412**

☐ Change ☒ Addition  
TITLE **Director**  
NAME **Alon Schiro**  
STREET ADDRESS **10772 Waterford Place**  
CITY-ST-ZIP **West Palm Beach FL**

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

☒ Change ☐ Addition  
TITLE **President**  
NAME **Frederick, Robert**  
STREET ADDRESS **9064 Lakes Blvd**  
CITY-ST-ZIP **West Palm Beach FL 33412**

☐ Change ☒ Addition  
TITLE **Vice President**  
NAME **Barbara Rutberg**  
STREET ADDRESS **7780 Blue Heron Way**  
CITY-ST-ZIP **West Palm Beach FL 33412**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Joel Langer Treasurer*

*4/19/04*

*561 691 3330*