

2000 UNIFORM BUSINESS REPORT (UBR)

5/16/00-90078-015-\$61.25-\$61.25

DOCUMENT # N99000005917

1. Entity Name

THE RUTH AND LUKE LEBEAU INTERNATIONAL CHILD RIG

Principal Place of Business

9880 GARDENS EAST DR.
PALM BCH FL 33410-4917

Mailing Address

9880 GARDENS EAST DR.
PALM BCH FL 33410-4917

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PALM BEACH GARDENS, FL

Zip

Country

City & State

PALM BEACH GARDENS, FL

Zip

Country

4. FEI Number

65-0951938

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEBEAU, JOHN J JR.
9880 GARDENS EAST DR.
PALM BCH FL 33410-4917

7. Name and Address of New Registered Agent

Name

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

City

PALM BEACH GARDENS

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

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

TITLE EXECUTIVE DIRECTOR
NAME JOHN J. LEBEAU, JR.
STREET ADDRESS 9880 GARDENS EAST DR.
CITY-ST-ZIP PALM BEACH GARDENS, FL 33410-4917

☐ Delete

TITLE DIRECTOR
NAME THOMAS A. JOHNSON
STREET ADDRESS 907 DALEBROOK DRIVE
CITY-ST-ZIP ALEXANDRIA, VA 22308

☐ Delete

TITLE DIRECTOR
NAME THOMAS R. SYLVESTER
STREET ADDRESS 4389 WOODLANDS PLACE
CITY-ST-ZIP CINCINNATI, OH 45241

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

☐ 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: John J. Lebeau, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 28, 2000

Date

Daytime Phone #

CR2E037 (9/99)