

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 01, 2003 8:00 am
Secretary of State

08-01-2003 90063 033 ****61.25

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1. Entity Name

SCHOLL FAMILY FOUNDATION, INC.



Principal Place of Business

C/O ELEANOR B. SCHOLL
~~10 HOLLY DRIVE~~ New address
401-E. Linton Blvd
BOYNTON BEACH FL 33436
Delray Beach, FL 33483

Mailing Address

C/O ELEANOR B. SCHOLL
~~10 HOLLY DRIVE~~
BOYNTON BEACH FL 33436
← Same

2. Principal Place of Business

401-E. Linton Blvd

3. Mailing Address

401-E. Linton Blvd

Suite, Apt. #, etc.

Apt 554

Suite, Apt. #, etc.

Apt 554

City & State

Delray Beach

City & State

Florida (Delray Beach)

Zip

33483

Country

U.S.A.

Zip

33483

Country

U.S.A.

4. FEI Number **65-0975467**

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

DAVID PRATT, P.A.
2101 CORPORATE BLVD STE 220
BOCA RATON FL 33431

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

Eleanor B. Scholl
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
After September 10, 2003, min will be \$236.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME D
STREET ADDRESS SCHOLL, ELEANOR B
CITY-ST-ZIP 10 HOLLY DRIVE address change
BOYNTON BEACH FL 33436

TITLE ☐ Change ☐ Addition
NAME SCHOLL, ELEANOR B
STREET ADDRESS 401-E. Linton Blvd (ADDRESS)
CITY-ST-ZIP Delray Beach Apt 554
Florida 33483

TITLE ☐ Delete
NAME D
STREET ADDRESS SCHOLL, DWIGHT A
CITY-ST-ZIP 9845-2 PINEAPPLE TREE DRIVE #205-8
BOYNTON BEACH FL 33436

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

TITLE ☐ Delete
NAME D
STREET ADDRESS SCHOLL, WALTER B
CITY-ST-ZIP 321 JELUFF MILL ROAD
NEW CANAAN CT 06840

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

TITLE ☐ Delete
NAME D
STREET ADDRESS CALDWELL, DEBORAH J
CITY-ST-ZIP 27 ELMWOOD AVENUE
CHATHAM NJ 07928

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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: *Eleanor B. Scholl* **REQUIRED**

7/29/2003 561-266-2225

CR2E037 (4/03)