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## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Aug 16, 2001 8:00 am E Secretary of State DOCUMENT # N9900006889 08-16-2001 90004 005 \*\*\*\*61.25 PALM AIRE FRIENDS OF THE ARTS, INC. Principal Place of Business Mailing Address 808 CYPRESS BLVD., APT. 407 NUUUAVAV 808 CYPRESS BLVD., APT, 407 POMPANO BEACH FL 33069 POMPANO BEACH FL 33069 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0980192 Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) WEINBERG, SYLVIA J 808 CYPRESS BLVD., APT. 407 POMPANO BEACH FL 33069 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 Make Check Payable to **\$5.00** May Be Trust Fund Contribution. After September 12, 2001, min. will be \$236.25 Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. D Bette Gelestein Addition TITLE Delete TITLE WEINBERG, SYLVIA J 3095 N. Course Dr, Apr 208 STREET ADDRESS STREET ADDRESS 808 CYPRESS BLVD., APT. 407 Pompoano Beach 76 33069 CITY-ST-ZIP POMPANO BEACH FL 33069 CITY-ST-ZIP gune Harris Change 3930 Oaks Clubbouse Dr 9pt 201 TITLE ☐ Delete TITLE NAME KATIMS, RITA NAME 3010 N. COURSE DRIVE, #509 STREET ADDRESS STREET ADDRESS Pompano Beaul 71 33069 CITY-ST-ZIP CITY-ST-ZIE POMPANO BEACH FL 33069 TITLE -D margaret Bascoyne \_\_\_ Change TITLE Delete WEINER, BEATRICE NAME 3990 N.W. 42 ST Apt 110 STREET ADDRESS 1005 EAST CYPRESS DRIVE STREET ADDRESS Lauderdele Lokes Fl. # 33319 CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33069 TITLE Delete TITLE Dorothy Exitein GRANT, ANN NAME NAME 2940 N. Coarse DV ApT 801 901 CYPRESS GROVE DR., 206 STREET ADDRESS STREET ADDRESS Pompano Beach Fl 33069 CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33069 Shirlan Siphin ☐ Change TITLE ☐ Delete TITLE NAME<sup>2</sup> VIGNOLA. MAYE NAME 806 Ceptreso Grove Lane A 506 901 CYPRESS GROVE DRIVE, 206 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33069 TITLE ☐ Delete TITLE ☐ Addition trabin, Ruth STREET ADDRESS 3520 OAKS WAY, APT. 403 STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL 33069 12. I hereby certify that the information supplied with this filling 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