

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2003 8:00 am
Secretary of State

02-05-2003 90147 044 ***158.75

DOCUMENT # P02000069570

1. Entity Name
ELM TREE CONSULTING, INC.



Principal Place of Business
3606 S. OCEAN BLVD., SUITE 1001
HIGHLAND BEACH FL 33487

Mailing Address
3606 S. OCEAN BLVD., SUITE 1001
HIGHLAND BEACH FL 33487

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

KZ 43-1979006

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

LUNTZ, ROBERT J
5455 EDGERTON AVENUE
LAKE WORTH FL 33463

7. Name and Address of New Registered Agent

Name
Thomas Luntz
Street Address (P.O. Box Number is Not Acceptable)
3606 S. Ocean Blvd Suite 1001
Highland Beach, FL
City
Highland Beach **FL** **Zip Code**
33487

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]*

(NOTE: Registered Agent signature required when reinstating)

1/31/03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PTD
LUNTZ, ANNA L ☐ Delete
3606 S. OCEAN BLVD., SUITE 1001
HIGHLAND BEACH FL 33487

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
CFOS
JIMENEZ, ROBERT J ☒ Delete
5455 EDGERTON AVENUE
LAKE WORTH FL 33463

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SECRETARY ☐ Change ☒ Addition
Thomas Luntz
500 FAIRWAY DR. #208
Deerfield Beach FL 33441

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
BM
CARLSTROM, LEIF ☐ Delete
OSTERGATAN 37 7TR
15243 SODERTALJE, SWEDEN

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
BM ☐ Change ☒ Addition
KAY A. LUNTZ
386 Brea Circle N.E.
North Canton, OH 44720

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
BM
LUNTZ, TOM ☐ Delete
1010 SEMINOLE DRIVE #1407
FORT LAUDERDALE FL 33304

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
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CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
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☐ Delete

TITLE
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 607, 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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/03 **561-274-4425**
Date **Daytime Phone #**

CR2E034 (10/02)