

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P93000087701**

1. Entity Name

THE WEISS SCHOOL, INC.**FILED**
Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90101 014 ***150.00

Principal Place of Business

4176 BURNS ROAD
STE. 110
PALM BEACH GARDENS FL 33410
US

Mailing Address

4176 BURNS ROAD
STE. 110
PALM BEACH GARDENS FL 33410
US

2. Principal Place of Business

4176 Burns Road
Suite, Apt. #, etc.

3. Mailing Address

4176 Burns Road
Suite, Apt. #, etc.

00017001



DO NOT WRITE IN THIS SPACE

City & State

Palm Beach Gardens, FL

City & State

Palm Beach Gardens, FL4. FEI Number **65-0465377**

Applied For

Not Applicable

Zip

33410

Country

USA

Zip

33410

Country

U.S.A.5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

UNDERWOOD, LESLIE B.
4176 BURNS ROAD
STE. 110
PALM BEACH GARDENS FL 33410

7. Name and Address of New Registered Agent

Name
Leslie B. Underwood
Street Address (P.O. Box Number is Not Acceptable)
4176 Burns RoadCity
Palm Beach Gardens **FL** Zip Code
33410

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

Leslie B. Underwood

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/31/01
DATE9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **WEISS, MARTIN D**
STREET ADDRESS **10233 ALLAMANDA CIRCLE**
CITY-ST-ZIP **PALM BCH. GRDNS. FL 33410**TITLE **PT** ☐ Delete
NAME **WEISS, M. ELIZABETH**
STREET ADDRESS **10233 ALLAMANDA CIRCLE**
CITY-ST-ZIP **PALM BCH. GRDNS. FL**TITLE **VPS** ☐ Delete
NAME **UNDERWOOD, LESLIE B.**
STREET ADDRESS **4176 BURNS ROAD**
CITY-ST-ZIP **PALM BEACH GARDENS FL**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☒ Change ☐ Addition
NAME **PT Weiss, M. Elisabeth**
STREET ADDRESS **10233 Allamanda Circle**
CITY-ST-ZIP **Palm Beach Gardens, FL 33410**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 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

Martin D. Weiss, Director and Ms. Elisabeth Weiss, Pres**1/31/01**

Date

(561) 627-3300

Daytime Phone #

CR2E034 (10/00)