

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 91005 040 ***158.75

DOCUMENT # P93000087701

1. Entity Name
THE WEISS SCHOOL, INC.



Principal Place of Business
**4176 BURNS ROAD
PALM BEACH GARDENS FL 33410
US**

Mailing Address
**4176 BURNS ROAD
PALM BEACH GARDENS FL 33410
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0465377**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name **John Leavitt**

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

4176 Burns Road

City **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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE **John Leavitt** **John Leavitt Treasurer**

3/27/2003

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

(NOTE: Registered Agent signature required when reinstating)

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 **D** ☐ Delete
NAME **WEISS, MARTIN D**
STREET ADDRESS **10233 ALLAMANDA CIRCLE**
CITY-ST-ZIP **PALM BCH. GRDNS. FL 33410**

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

TITLE **PT** ☐ Delete
NAME **WEISS, M. ELIZABETH**
STREET ADDRESS **10233 ALLAMANDA CIRCLE**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

TITLE **P** ☒ Change ☐ Addition
NAME **Weiss, M. Elisabeth**
STREET ADDRESS **4176 Burns Road**
CITY-ST-ZIP **Palm Beach Gardens FL 33410**

TITLE **VPS** ☒ Delete
NAME **UNDERWOOD, LESLIE B.**
STREET ADDRESS **4176 BURNS ROAD**
CITY-ST-ZIP **PALM BEACH GARDENS FL**

TITLE **VP** ☐ Change ☒ Addition
NAME **Dr. Rosemary Daniels**
STREET ADDRESS **4176 Burns Road**
CITY-ST-ZIP **Palm Beach Gardens FL 33410**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☐ Change ☒ Addition
NAME **John Leavitt**
STREET ADDRESS **4176 Burns Road**
CITY-ST-ZIP **Palm Beach Gardens FL 33410**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☐ Change ☒ Addition
NAME **Tracey L. Sprovieri**
STREET ADDRESS **4176 Burns Road**
CITY-ST-ZIP **Palm Beach Gardens FL 33410**

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 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 **John Leavitt** **John Leavitt**

3/27/2003

(561) 627-3300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)