

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

02 JUN 14 PM 2:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000037562

1. Entity Name

AAM Palm Beach Capital Group, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
249 Royal Palm Way3. Mailing Address
218 Royal Palm WaySuite, Apt. #, etc.
Suite 400Suite, Apt. #, etc.
Suite 100

DO NOT WRITE IN THIS SPACE

City & State
Palm Beach, FLCity & State
Palm Beach, FL4. FEI Number
65-057922Applied For
Not ApplicableZip
33480Country
USAZip
33480Country
USA5. Certificate of Status Desired ☐ \$8.75 Additional
Fee RequiredDO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Lexis Document Services, Inc.

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

3953 W. W. Kelley Road

City Tallahassee, FL Zip Code 32311

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

C. Woodard, as agent, LDS

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

(NOTE: Registered Agent signature required when reinstating)

6/14/02

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirements and elects to do so.
(See criteria on back) ☒January 1 - May 1: Fee is \$150.00
After May 1: Fee is \$550.00
Amended UBR is \$61.25
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/P
NAME J. Bradford Greer
STREET ADDRESS 133 Forester Court
CITY-ST-ZIP Wellington, FL 33414TITLE D
NAME Andrew Jarnal
STREET ADDRESS 10842 Egret Pointe Lane
CITY-ST-ZIP West Palm Beach, FL 33412TITLE D/S/T
NAME Barry G. Hoyt
STREET ADDRESS 133 Banyan Road
CITY-ST-ZIP Palm Beach, FL 33480TITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE D
NAME Cordon L. Brekus
STREET ADDRESS 120 Dunbar Road
CITY-ST-ZIP Palm Beach, FL 33480TITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE D
NAME Doc Jones Thurston II
STREET ADDRESS 2419 Red Fox Trail
CITY-ST-ZIP Charlotte, NC 28211TITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE D
NAME Allan W. Fulkerson
STREET ADDRESS One Liberty Square
CITY-ST-ZIP Boston, MA 02109TITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
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)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE

J. Bradford Greer

5/1/02

(561) 650-0200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E004B (12/01)