

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000068661

1. Entity Name

CENTURY 21 PALM BEACH COUNTY COUNCIL, INC.

**FILED**  
**May 11, 2000 8:00 am**  
**Secretary of State**

05-11-2000 90288 030 \*\*\*150.00

Principal Place of Business

6528 HYPOLUXO ROAD  
LAKE WORTH FL 33467

Mailing Address

6528 HYPOLUXO ROAD  
LAKE WORTH FL 33467-7678

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

65-0774081

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TURNER, SALLY L  
CENTURY 21 SUNLAND REALTY  
6528 HYPOLUXO ROAD  
LAKE WORTH FL 33467

Name

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

City

FL

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

9. 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, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	HOLMES, MARK	
STREET ADDRESS	11585 US HIGHWAY 1	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33408	
TITLE	VP	<input type="checkbox"/> Delete
NAME	GAFFNEY, STEVE	
STREET ADDRESS	1896 PALM BEACH LAKES BLVD., #103	
CITY-ST-ZIP	WEST PALM BEACH FL 33409	
TITLE	T	<input type="checkbox"/> Delete
NAME	TURNER, SALLY L	
STREET ADDRESS	6528 HYPOLUXO ROAD	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	S	<input type="checkbox"/> Delete
NAME	AHEARN, KEN	
STREET ADDRESS	6346 W. LANTANA ROAD #71	
CITY-ST-ZIP	LAKE WORTH FL 33463	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:

*Sally L Turner*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/00

Date

561 965-7628

Daytime Phone #

CR2E034 (9/99)