

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000050959

1. Entity Name

PARTNERS RESOLUTION CORP.

**FILED**  
**Apr 25, 2000 8:00 am**  
**Secretary of State**

04-25-2000 90055 038 \*\*\*150.00

Principal Place of Business

250 AUSTRALIAN AVE SOUTH, SUITE 400  
WEST PALM BEACH FL 33401

Mailing Address

250 AUSTRALIAN AVE SOUTH, SUITE 400  
WEST PALM BEACH FL 33401-5012

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0841595

Applied For

Not Applicable

Zip

Country

Zip

Country

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

STEINER, JANE M  
25 AUSTRALIAN AVE  
SUITE 400  
W PALM BCH FL 33401

Name  
Jeffrey P. Janisch

Street Address (P.O. Box Number is Not Acceptable)  
250 Australian Avenue, Suite 400

City West Palm Beach

FL

33401

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

By: *Jeffrey P. Janisch*

Jeffrey P. Janisch, Registered Agent

4/19/2000

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  
NAME  
DPS  
WRIGHT, LARRY E  
STREET ADDRESS  
250 AUSTRALIAN AVE STE 400  
CITY-ST-ZIP  
W PALM BCH FL 33401 ☐ Delete

TITLE  
NAME  
D/P/T/S  
LARRY E. WRIGHT  
STREET ADDRESS  
250 AUSTRALIAN AVENUE, SUITE 400  
CITY-ST-ZIP  
WEST PALM BEACH, FL 33401 ☒ Change ☐ Addition

TITLE  
NAME  
DV  
COTE, JAMES A  
STREET ADDRESS  
2175 N CALIFORNIA BLVD STE 800  
CITY-ST-ZIP  
WALNUT CREEK CA 94596 ☐ Delete

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

TITLE  
NAME  
DV  
VOGT, LOUIS E  
STREET ADDRESS  
5025 SWEETLAND CT  
CITY-ST-ZIP  
RICHMIND HEIGHTS OH 44143 ☐ Delete

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

TITLE  
NAME  
VTAS  
GUTIN, KATHLEEN L  
STREET ADDRESS  
250 AUSTRALIAN AVE STE 400  
CITY-ST-ZIP  
W PALM BCH FL 33401 ☒ Delete

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

TITLE  
NAME  
DV  
HUGHES, WILLIAM T JR.  
STREET ADDRESS  
250 AUSTRALIAN AVE STE 400  
CITY-ST-ZIP  
W PALM BCH FL 33401 ☐ Delete

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

TITLE  
NAME  
DV  
GOLZ, GREGORY L  
STREET ADDRESS  
400 LATHROP STE 201  
CITY-ST-ZIP  
RIVER FOREST IL 60305 ☐ Delete

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

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:

By: *Larry E. Wright*

LARRY E. Wright, Pres.

4/19/00

(561) 880-1300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)