

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000063581

1. Entity Name

PALM RIVER DEVELOPMENT CO., INC.

FILED
Apr 07, 2001 8:00 am
Secretary of State

04-07-2001 90006 006 ***150.00

Principal Place of Business

660 U.S. HWY. ONE
NORTH PALM BEACH FL 33408

Mailing Address

660 U.S. HWY. ONE
NORTH PALM BEACH FL 33408

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

65-0934434

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

PITTARD, JAMES B JR.
660 U.S. HWY. ONE
NORTH PALM BEACH FL 33408

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, 2001 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 D	<input type="checkbox"/> Delete
NAME	PITTARD, JAMES B Jr.	
STREET ADDRESS	660 US HWY ONE	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE	VP	<input type="checkbox"/> Delete
NAME	HOWARD, CECIL F JR	
STREET ADDRESS	660 US HWY ONE	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE	D AS	<input type="checkbox"/> Delete
NAME	CROMWELL, ROBERT F	
STREET ADDRESS	660 US HWY ONE	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE	D	<input type="checkbox"/> Delete
NAME	STEVENS, HAROLD I Stevenson	
STREET ADDRESS	660 US HWY ONE	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE	D AS	<input type="checkbox"/> Delete
NAME	TEED, FREDERICK A	
STREET ADDRESS	660 US HWY ONE	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	
TITLE	T	<input type="checkbox"/> Delete
NAME	BAKER, LARRY J	
STREET ADDRESS	660 US HWY ONE	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	

TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Deborah M. Rousseau	
STREET ADDRESS	660 U.S. Highway One	
CITY-ST-ZIP	North Palm Beach FL 33408	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Charles J. Gifford	
STREET ADDRESS	660 U.S. Highway One	
CITY-ST-ZIP	North Palm Beach, FL 33408	
TITLE	AT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Donna L. Sheppard	
STREET ADDRESS	660 U.S. Highway One	
CITY-ST-ZIP	North Palm Beach, FL 33408	
TITLE	Assistant Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Trina L. Miles	
STREET ADDRESS	660 U.S. Highway One	
CITY-ST-ZIP	North Palm Beach, FL 33408	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ronald P. Jaworski	
STREET ADDRESS	660 U.S. Highway One	
CITY-ST-ZIP	North Palm Beach, FL 33408	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	J. Sheldon Clark	
STREET ADDRESS	660 U.S. Highway One	
CITY-ST-ZIP	North Palm Beach, FL 33408	

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:

Deborah M. Rousseau
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Deborah M. Rousseau, Secretary

Date

Daytime Phone #

March 27, 2001

CR2E034 (10/00)

0298712