

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2002 8:00 am
Secretary of State

03-24-2002 90007 035 ***150.00

DOCUMENT # P99000065510

1. Entity Name
THE JT BUTWIN MANAGEMENT CORPORATION

Principal Place of Business
2424 NORTH FEDERAL HIGHWAY #300
BOCA RATON FL 33431

Mailing Address
2424 NORTH FEDERAL HIGHWAY #300
BOCA RATON FL 33431



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
7700 Congress Ave
Suite, Apt. #, etc.
3203

3. Mailing Address
7700 Congress Ave
Suite, Apt. #, etc.
3203

City & State
Boca Raton FL

City & State
Boca Raton FL

Zip
33487

Country
USA

Zip
33487

Country
USA

4. FEI Number **65-0936407**

Applied For
☐ **Not Applicable**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
BUTWIN, JEROME T
2424 NORTH FEDERAL HIGHWAY #300
BOCA RATON FL 33431

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
7700 Congress Avenue # 3203
City **Boca Raton** **FL** **Zip Code** **33487**

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]* **3/7/02**
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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUTWIN, JEROME T		NAME		
STREET ADDRESS	2424 N FEDERAL HWY #300		STREET ADDRESS	7700 Congress Ave # 3203	
CITY-ST-ZIP	BOCA RATON FL 33431		CITY-ST-ZIP	Boca Raton FL 33487	
TITLE	V	<input type="checkbox"/> Delete	TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUTWIN, FRANCINE B		NAME		
STREET ADDRESS	2424 N FEDERAL HWY #300		STREET ADDRESS	7700 Congress Ave # 3203	
CITY-ST-ZIP	BOCA RATON FL 33431		CITY-ST-ZIP	Boca Raton FL 33487	
TITLE	ST	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DENTRY, DEBORAH A		NAME	Same	
STREET ADDRESS	3540 FOREST HILL BOULEVARD #203		STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 33406		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: *[Signature]* **Deborah A. Dentry** **3/7/02** **561-949393**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)