

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P99000104619****1. Entity Name**
THE NOBLE GROUP, INC.**Principal Place of Business**
1645 PALM BEACH LAKE BLVD.
SUITE 1200
WEST PALM BEACH FL 33401**Mailing Address**
1645 PALM BEACH LAKE BLVD.
SUITE 1200
WEST PALM BEACH FL 33401**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
65-0974776Applied 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****LIOCE, DOMENICK**
1645 PALM BEACH LAKE BLVD.
SUITE 1200
WEST PALM BEACH FL 33401

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/T/D ☐ Delete
NAME Desrochers, David K.
STREET ADDRESS 1645 Palm Beach Lakes Blvd., #1200
CITY-ST-ZIP West Palm Beach, FL 33401**TITLE** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** VP/D ☐ Delete
NAME Perrone, Martin R.
STREET ADDRESS 1645 Palm Beach Lakes Blvd, #1200
CITY-ST-ZIP West Palm Beach, FL 33401**TITLE** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** VP/D ☐ Delete
NAME Hunt, James C.
STREET ADDRESS 1645 Palm Beach Lakes Blvd., #1200
CITY-ST-ZIP West Palm Beach, FL 33401**TITLE** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** S/D ☐ Delete
NAME Lioce, Domenick R.
STREET ADDRESS 1645 Palm Beach Lakes Blvd., #1200
CITY-ST-ZIP West Palm Beach, FL 33401**TITLE** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**TITLE** ☐ Change ☐ 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/00

Date

561-686-3307

Daytime Phone #

FILED
Jun 09, 2000 8:00 am
Secretary of State

06-09-2000 90022 017 ***150.00



DO NOT WRITE IN THIS SPACE

CE 1004-10000