

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 705099 ✓

1. Entity Name

SELAMA GROTTO CEREBRAL
PALSY ENDOWMENT, INC.

Principal Place of Business

Mailing Address

3000 16TH STREET, NORTH
ST. PETERSBURG, FL 33704

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

59-6139437

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GEORGE A. NICHOLSON
4470 GREAT LAKES DRIVE, N.
CLEARWATER, FL 33762-5274

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

FILE NOW:
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

P
JOHN W. LOVELACE
1533 83RD AVE, N.
ST. PETERSBURG, FL 33702☐ DeleteVP
FRANKLYN P. SCHREIHOFFER
652 51ST AVE, S.
ST. PETERSBURG, FL 33705☐ DeleteT
HENRY L. GRIFFITH
5556 81ST TER, N.
PINELLAS PARK, FL 33781☐ DeleteS.
EDWARD W. FLOWERS☐ DeleteP
LOUIS W. BREHTEL
9790 66TH ST, N.
PINELLAS PARK, FL 33782☐ DeleteD
ALFRED M. RODGERS
6671 EMERSON AVE, S.
ST. PETERSBURG, FL 33707☐ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ Change ☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 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

Date

Daytime Phone #

HENRY L. GRIFFITH 3-15-01 727-544-6436

CR2E037 (11/00)

ITEM 10 (CONT'D)

Attachment
F05099
A035588

D

DONALD W. UPTON
6580 SEMINOLE BLVD, #747
SEMINOLE, FL 33772

D

HAROLD E. MALONE
7360 ULMERTON RD, #28F
LARGO, FL 33771

D

GORDON H. HILL
4947 TTH AVE, N.
ST. PETERSBURG, FL 33710

D

WOODROW F. BAILEY
10100 PARADISE BLVD
TREASURE ISLAND, FL 33706

D

MONTAGUE R. CHANCEY
5695 78TH AVE, N.
PINELLAS PARK, FL 33781

D

CHARLES E. CHAPMAN
3201 1st ST, NE
ST. PETERSBURG, FL 33704

NOTE: I DID NOT GET THE PREPRINTED FORM, THEREFORE SOME
ENTRIES IN ITEM 10 MAY BE CHANGES OR CORRECTIONS.