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(904) 680-7702

Daytime Phone #

4-26-01

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Jun 06, 2001 8:00 am Secretary of State **DOCUMENT # 732400** 05-14-2001 90191 018 ****70.00 FLORIDA COASTAL SCHOOL OF LAW FOUNDATION, INC. Principal Place of Business Mailing Address 801 ANCHOR RODE DR., STE 206 FINANCE OFFICER NAPLES FL 34103 7555 BEACH BLVD JACKSONVILLE FL 32216 2. Principal Place of Business 3. Mailing Address 7555 Beach Blvd DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State Jacksonville, FL City & State 59-2331156 Not Applicable \$8.75 Additional 5. Certificate of Status Desired USA 32216 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Donald Lively Str. et Address (P.Q. Box Number is Not Acceptable) TURNER, BERNARD L 801 ANCHOR RODE DR., STE 206 NAPLES FL 34103 Zip Code 32216 Jacksonville 8. The above named entity submits this statement for the purpose of changing its egistered office or registered agent, or both, in the state of Florida. Donald E. Lively Make Check Payable to mpaign Financing \$5.00 May Be FILE NOW: Trust Fund Contribution. Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. Change XX Addition XX Delete HILE TURNER, BERNARD L NAME Lively, Donald E. NAME STREET ADT RESS STREET ADDRESS 801 ANCHOR RODE DR., STE 206 1815 Kings Court CITY-SI-ZI CITY-ST-ZIP NAPLES FL 34103 <u>Jacksonville Beach, FL</u> Change Addition DRE XX Delete TITLE TURNER, RITA NAME NAME Coker, Howard 801 ANCHOR RODE DR., STE 206 STREET ADJURESS STREET ADDRESS 136 East Bay Street CITY+SI-Z 3 CITY-ST-ZIP NAPLES FL 34103 Jacksonville, FL 32202 ☐ Change ★ Addition IIILE Dalate DANFORD, RICHARD DR. NAME Chinoy, Kathy NAME 223 W. DUVAL ST., 14TH FLOOR STREET ADI RESS STREET ADDRESS 1407 Ponte Vedra Blvd Ponte Vedra Beach, FL 32082 Change XX Addition CITY-ST-Z 3 JACKSONVILLE FL 32202 CITY-ST-ZIP TITLE Delete TITLE NAME Frashuer, Louis A. STREET AD: RESS STREET ADDRESS 2205 Holly Oaks River Drive CITY-ST-Z P CITY-ST-ZIP Jacksonville, FL 32225 D TITLE Change Addition Delete TITLE NAME Lemley, Charles STREET AD RESS STREET ADDRESS One Alltel Stadium ČITY-ST-ZÍP CITY-57-7 2 Jacksonville, FL -32202 Addition ☐ Change ☐ Delete THILE TILE NAME NAME STREET AD IRESS STREET ADDRESS CITY-ST-7/P 12. I hereby certify that the information supplied with this filling does not qualify for the exempt: in 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 that 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 of the corporation or the receiver or trustee empechanged, or on an attachment with an address, Donald E. Lively