

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 09, 2002 8:00 am
Secretary of State

05-09-2002 90092 036 ****61.25

DOCUMENT # N00000008147
1. Entity Name
GEBHARDT FOUNDATION, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5601 Turtle Bay Drive
Suite, Apt. #, etc.

3. Mailing Address
5811 Pelican Bay Blvd.
Suite, Apt. #, etc.
Suite 600

DO NOT WRITE IN THIS SPACE

City & State
Naples, FL
Zip
34108
Country

City & State
Naples, FL
Zip
34108
Country

4. FEI Number
65-1059870

Applied For
Not Applicable

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name
FOWLER WHITE MYERS KRAUSE
Street Address (P.O. Box Number is Not Acceptable)
5811 Pelican Bay Blvd.
Suite 600
City
Naples FL Zip Code
34108

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 By: *Andrew J. Krause*
Signature, typed or printed name of registered agent and title if applicable. Andrew J. Krause
Its: Managing Shareholder
(NOTE: Registered Agent signature required when reinstating) DATE 4-24-02

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D GEBHARDT, ARTHUR A. 5601 Turtle Bay Drive Naples, FL 34108	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V/D GERHARDT, PATRICIA A. 5601 Turtle Bay Drive Naples, FL 34108	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S/D NYGAARD, ELLEN C. 1827 Royal Oak Drive Lynchburg, VA 24503	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T/D HAMMILL, SARAH 425 W. Appletree Court 99N Mequon, WI 53092-6201	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 on an attachment with an address, with all other like empowered.
SIGNATURE: *Arthur A. Gebhardt*
Signature and typed or printed name of signing officer or director Arthur A. Gebhardt President
Date 4-24-02 Daytime Phone # 239-598-1221

CR2E037B (12/01)