

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N41555

FILED
Apr 15, 2003
Secretary of State

Entity Name: FLORIDA FAMILY COUNCIL, INC.

Current Principal Place of Business:

101 E. KENNEDY BLVD.
SUITE 1070
TAMPA, FL 33602 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2882
TAMPA, FL 33601

New Mailing Address:

FEI Number: 59-3043408 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERRILL, MARK W.
101 E. KENNEDY BLVD., SUITE 1070
ATTN: MARK W. MERRILL
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: MERRILL, MARK W.,
Address: 101 E KENNEDY BLVD., STE 1070
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: CARMICHAEL, MICHAEL
Address: 1511 S.W. FIRST AVE.
City-St-Zip: OCALA, FL 34474

Title: D () Delete
Name: BABCOCK, CHARLES I III
Address: 2914 ELYSIUM WAY
City-St-Zip: CLEARWATER, FL 34619

Title: D () Delete
Name: CUNNINGHAM, JOYCE D
Address: 251 RIPPLING LANE
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: FLORES, ARMANDO
Address: 4015 CARROLLWOOD VILLAGE DR
City-St-Zip: TAMPA, FL 33624

Title: D () Delete
Name: GAYLORD, S C
Address: 900 LORENA RD
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BABCOCK, MARY ANNE
Address: 2914 ELYSIUM WAY
City-St-Zip: CLEARWATER, FL 33759

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK W MERRILL

D

04/15/2003

Electronic Signature of Signing Officer or Director

_____ Date

SYLVIA SPENCER - DIRECTOR
13840 ADMIRALS BEND DR
JACKSONVILLE, FL 32225-5420

KENDALL SPENCER - DIRECTOR
13840 ADMIRALS BEND DR
JACKSONVILLE, FL 32225-5420

JOAN P. SKINNER - DIRECTOR
RT. 1 BOX 225, S.R. 11
BUNNELL, FL 32110

BRYANT B. SKINNER, JR. - DIRECTOR
RT. 1 BOX 225, S.R. 11
BUNNELL, FL 32110

ANN K GAYLORD - DIRECTOR
900 LARENA RD
LUTZ, FL 33549

BECKIE E. CARMICHAEL - DIRECTOR
1511 S.W. FIRST AVE
OCALA, FL 34474-4005

ROSE CAHILL - DIRECTOR
2667 LAKE SHORE DR
ORLANDO, FL