

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 17, 2000 8:00 am**  
**Secretary of State**

03-17-2000 90001 030 \*\*\*\*61.25

**DOCUMENT # N50701**

1. Entry Name

**THE PARENTS, FAMILIES AND FRIENDS OF LESBIANS AN**

Principal Place of Business

Mailing Address

P O BOX 141312  
 ORLANDO FL 32814-1312

P O BOX 141312  
 ORLANDO FL 32814-1312

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

**59-3148285**

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

**KOLTNOW, MICHAEL**  
**823 LEOPARD TRAIL**  
**WINTER SPRINGS FL 32208**

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 \$61.25**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input checked="" type="checkbox"/> Delete
NAME	<b>KOLTNOW, MICHAEL</b>
STREET ADDRESS	<b>823 LEOPARD TRAIL</b>
CITY-ST-ZIP	<b>WINTER SPRINGS FL</b>
TITLE	<input type="checkbox"/> Delete
NAME	<b>S D VARBLOW, JUDY</b>
STREET ADDRESS	<b>896 W CHARING CROSS CIRCLE</b>
CITY-ST-ZIP	<b>LAKE ATEY FL 32746</b>
TITLE	<input checked="" type="checkbox"/> Delete
NAME	<b>S RYDER, LOIS</b>
STREET ADDRESS	<b>209 PANORAMA DR</b>
CITY-ST-ZIP	<b>WINTER SPRINGS FL 32708</b>
TITLE	<input type="checkbox"/> Delete
NAME	<b>MBD JACKOWITZ, SYD</b>
STREET ADDRESS	<b>2502 CHANUTE TRAIL</b>
CITY-ST-ZIP	<b>MAITLAND FL 32751</b>
TITLE	<input type="checkbox"/> Delete
NAME	<b>MBD MERKT, DIANA H</b>
STREET ADDRESS	<b>501 GREENSPRING CIR</b>
CITY-ST-ZIP	<b>WINTER SPRINGS FL 32708</b>
TITLE	<input type="checkbox"/> Delete
NAME	<b>MBD BAUER, BECKIE</b>
STREET ADDRESS	<b>8661 ASPEN AVE</b>
CITY-ST-ZIP	<b>ORLANDO FL 32817</b>

TITLE	<b>Director</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<b>Director</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>JEFF POWELL</b>	
STREET ADDRESS	<b>4428 S. Lake Orlando Parkway</b>	
CITY-ST-ZIP	<b>ORLANDO, FL 32808</b>	
TITLE	<b>Director &amp; Treasurer</b>	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<b>PRESIDENT &amp; Director</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 #

*[Signature]* **SYD JACKOWITZ** 3/12/00 (407) 628-0282

CR2E037 (9/99)