

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2001 8:00 am
Secretary of State

02-28-2001 90087 046 ****61.25

DOCUMENT # N94000000386 ✓
 1. Entity Name
THE CROSLY ESTATE FOUNDATION, INC.

Principal Place of Business Mailing Address

Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
P.O. Box 6051

City & State City & State
BRADENTON, FL.
 Zip Country Zip Country
34281 MANATEE

4. FEI Number Applied For
65-0678528 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
DUNLAP, WALLACE
849 WATERSIDE LANE
BRADENTON, FL. 34209

7. Name and Address of New Registered Agent
 Name SHIRLEY ADAMS
 Street Address (P.O. Box Number is Not Acceptable)
2704 BAY DRIVE
 City BRADENTON FL Zip Code 34207

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 SHIRLEY ADAMS Shirley Adams 2/4/01
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. <u>New</u> OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>DC</u> <u>KATHRYN McMULLAN</u> <u>109 - 24TH ST. N.W.</u> <u>BRADENTON, FL. 34205</u> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>DVC</u> <u>NATALIE GUNDRUM</u> <u>325 SOMERSET AVE.</u> <u>SARASOTA, FL. 34243</u> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>DVC</u> <u>NORMAN LUPINO</u> <u>485 MAGELLAN DR.</u> <u>SARASOTA, FL. 34243</u> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>DS - DT</u> <u>SHIRLEY ADAMS</u> <u>2704 BAY DR.</u> <u>BRADENTON, FL. 34207</u> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>D</u> <u>DORIS WRIGHT</u> <u>191V - 72 ND ST. NW.</u> <u>BRADENTON, FL. 34209</u> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CR2E037 (11/00)

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: SHIRLEY ADAMS - Shirley Adams 2/4/01 941-739-9225
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #