

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 06, 2001 8:00 am
Secretary of State
 04-06-2001 90018 007 ****61.25

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DOCUMENT # N95000002703

1. Entity Name

THE FLORIDA CRIMINAL JUSTICE EXECUTIVE INSTITUTE

Principal Place of Business

Mailing Address

140 ARICA LANE
 CUDJO KEY FL 33042-4235

140 ARICA LANE
 CUDJO KEY FL 33042-4235

DUU6J307



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0593595

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WINEGARDEN, BRUCE
140 ARICA LANE
CUDJO KEY FL 33042-4235

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: PD
 NAME: SCHEIBER, REBECCA K
 STREET ADDRESS: 1665 BOSARGE DR
 CITY-ST-ZIP: BARTOW FL 33830 Delete

TITLE: Change Addition

TITLE: VD
 NAME: LENEMIER, RICHARD
 STREET ADDRESS: 402 SOUTH PINE AVE
 CITY-ST-ZIP: Ocala FL 34474 Delete

TITLE: Change Addition

TITLE: VD
 NAME: SCHREIBER, REBECCA K
 STREET ADDRESS: 1665 BOSARGE DR.
 CITY-ST-ZIP: BARTOW FL 33830 Delete

TITLE: Change Addition

TITLE: VD
 NAME: FELDMAN, GREG
 STREET ADDRESS: 10355 SW 135 ST.
 CITY-ST-ZIP: MIAMI FL 33176 Delete

TITLE: Change Addition

TITLE: ST
 NAME: WINEGARDEN, BRUCE
 STREET ADDRESS: 140 ARICA LANE
 CITY-ST-ZIP: CUDJO KEY FL 33042-4235 Delete

TITLE: Secretary/Treasurer
 NAME: Robert C. Merchant, Jr.
 STREET ADDRESS: P.O. Box 620862
 CITY-ST-ZIP: Oviedo, FL 32762-0862 Change Addition

TITLE: VD
 NAME: DRAYTON, CAREY M
 STREET ADDRESS: 2280 INDIAN SPRINGS CT.
 CITY-ST-ZIP: TALLAHASSEE FL 32303 Delete

TITLE: Change Addition

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: *Rebecca K Scheiber*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/01

863-297-3101

Date

Daytime Phone #

CR2E037 (10/00)