

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2002 8:00 am
Secretary of State

02-13-2002 90137 033 ****61.25

DOCUMENT # N95000005882

1. Entity Name
THE ELISE BEAR AND WILLIAM D. POLLAK FAMILY CHARITABLE FOUNDATION, INC.

| | |
|--|--|
| Principal Place of Business 6730 EPPING FORREST WAY #107 JACKSONVILLE FL 32217 US | Mailing Address 6730 EPPING FORREST WAY #107 JACKSONVILLE FL 32217 US |
|--|--|



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 **59-3352837**

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

**POLLAK, LEWIS B SR
 6730 EPPING FOREST WAY N.
 #107
 JACKSONVILLE FL 32217**

| |
|--|
| Name |
| Street Address (P.O. Box Number is Not Acceptable) |
| City |
| State 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE \$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 | NAME | STREET ADDRESS | CITY-ST-ZIP | Change | Addition |
|-------|-----------------------|--------------------------------|-----------------------|--------------------------|--------------------------|
| DPT | POLLAK, LEWIS B | 6730 EPPING FOREST WAY N. #107 | JACKSONVILLE FL 32217 | <input type="checkbox"/> | <input type="checkbox"/> |
| DPT | POLLAK, BRENDA B | 6730 EPPING FOREST WAY N. #107 | JACKSONVILLE FL 32217 | <input type="checkbox"/> | <input type="checkbox"/> |
| DPT | POLLAK, LEWIS B JR | 1879 MIDDLETON RD | HUDSON OH 44238 | <input type="checkbox"/> | <input type="checkbox"/> |
| D | POLLAK, WILLIAM D. II | 2189 KEATS DR | PENSACOLA FL 32503 | <input type="checkbox"/> | <input type="checkbox"/> |
| D | POLLAK, KAREN E | 8251 MARY KITCHENS RD | MILTON FL 32583 | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

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: William D. Pollak **REQUIRED** *1/20/02* 904-732-3045
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)