FILED Jan 14, 2003 8:00 am Secretary of State

01-14-2003 90081 034 ****61.25

ITABLE FOUNDATION, INC. Principal Place of Business Mailing Address 6730 EPPING FORREST WAY 6730 EPPING FORREST WAY /0008767 #107 JACKSONVILLE FL 32217 JACKSONVILLE FL 32217 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-3352837 Applied For Zip Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Fee Required 7. Name and Address of New Registered Agent POLLAK, LEWIS B SR 6730 EPPING FOREST WAY N. Street Address (P.O. Box Number is Not Acceptable) #107 JACKSONVILLE FL 32217 City 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. I am familiar with, and accept SIGNATURE . Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE NAME POLLAK, LEWIS B ☐ Addition NAME STREET ADDRESS 6730 EPPING FOREST WAY N. #107 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32217 **CR2E037** CITY-ST-ZIP TITLE DPT ☐ Delete POLLAK, BRENDA B NAME ☐ Change ☐ Addition NAME 6730 EPPING FOREST WAY N. #107 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32217 CITY-ST-ZIP TITLE dpt --- Delete TITLE-POLLAK, LEWIS B JR Change --NAME STREET ADDRESS 1879 MIDDLETON RD STREET ADDRESS CITY-ST-ZIP **HUDSON OH 44236** CITY-ST-ZIP ☐ Delete TITLE NAME POLLAK, WILLIAM D. II ☐ Change ☐ Addition NAME STREET ADDRESS 2189 KEATS DR STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 32503 CITY-ST-ZIP TITLE ☐ Delete TITLE POLLAK, KAREN E NAME ☐ Change ☐ Addition STREET ADDRESS 6251 MARY KITCHENS RD STREET ADDRESS CITY-ST-ZIP MILTON FL 32583 CITY-ST-ZIP ☐ Delete TITLE NAME ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE

2003 NOT-FOR-PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR

DOCUMENT # N95000005882

THE ELISE BEAR AND WILLIAM D. POLLAK FAMILY CHAR