2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 17, 2000 8:00 am Secretary of State DOCUMENT # N9900005331 1. Entity, Name EATONVILLE FRONT PORCH COMMUNITY COALITION, INC. 03-17-2000 90035 021 ****61.25 Mailing Address Principal Place of Business 307 E. KENNEDY BLVD. 307 E. KENNEDY BLVD. EATONVILLE FL 32751-6806 EATONVILLE FL 32751 2. Principal Place of Business Mailing Address 41543 CLAR DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent -7: Name and Address of New Registered Agent Name EVELYN Street Address (P.O. Box Number is Not Acceptable) SPIEGEL & UTRERA, P.A. 343 ALMERIA AVE. **CORAL GABLES FL 33134** 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 DATE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. 'Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME NASH, EVELYN 5 CLARK STREET ADDRESS 307 E. KENNEDY BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP EATONVILLE FL 32751 ☐ Addition ☐ Delete TITLE TITLE BROWN, THOMAS **BROWN, THOMAS** NAME NAME 109 WASHINGTON AVE. STREET ADDRESS STREET ADDRESS 307 E. KENNEDY BLVD. CITY-ST-ZIP CITY-ST-ZIP KLANDO, FL 32810 EATONVILLE FL 32751 ☐ Addition Delete X Change D TITLE TITLE NATHIRI, N.Y. NAME NATHIRI, NY NAME BLUD STREET ADDRESS STREET ADDRESS 307 E. KENNEDY BLVD. CITY-ST-ZIP GATONUELLO. <u> 32751</u> CITY-ST-ZIP EATONVILLE FL 32751 **X** Change ☐ Addition MINERMAN, DUANE TITLE Delete TITLE 2IMMERRIAN, EDY BLUD 434 W. KENNEDY BLUD DL. 32810 ZIMMERMAN, DUANE NAME NAME STREET ADDRESS STREET ADDRESS 307 E. KENNEDY BLVD. CITY-ST-ZIP CITY-ST-ZIP **EATONVILLE FL 32751** 💢 Change ☐ Addition TITLE ☐ Delete TITLE JOHNSON-WRIGHT, LOUISE TOHUSON WEIGHT, NAME NAME WYISE 306 LEMON STREET ADDRESS 307 E. KENNEDY BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **EATONVILLE FL 32751** Change Addition TITLE Delete TITLE JAMES ANDREWS, J. WILLIAM NAME NAME IAMS. LINCOLN STREET ADDRESS STREET ADDRESS 307 E. KENNEDY BLVD.

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.

CITY-ST-ZIP

SIGNATURE:

EATONVILLE FL 32751

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-13-00

32810

407-599-0945 Daytime Phone #

2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N99000005331 EATONVILLE FRONT PORCH COMMUNITY COALIFION, THE Principal Place of Business Mailing Address 307 E. KENNEDT BLVD. 307 E. KENNEDY BLVD. EATONVILLE FL 32751 EATONVILLE FL 32751-6806 2. Principal Place of Business 3. Mail o Address Suite, Apt. #, etc. uite, Apt 🕊 etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City'& State Applied For Not Applicable Zip Country Zip Sountry \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) SPIEGEL & UTRERA, P.A. 343 ALMERIA AVE. CORAL GABLES FL 33134 City Zip Code FL 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 CATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's gnature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees FEE IS \$61.25 Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Delete TITLE BARGAIN GER, CHARLOS NAME Nash, Evelyn STREET ADDRESS STREET ADDRESS 24 CALHOUN AUG 307 E. KENNEDY BLVD. CITY-ST-ZIP CITY-ST-ZIP EATONVILLE FL 32751 Delete TITLE Change TITLE **BROWN, THOMAS** NAME NAME STREET ADDRESS STREET ADDRESS 307 E. KENNEDY BLVD. CITY-ST-7(P CITY-ST-ZIP EATONVILLE FL 32751 Change - =- Addition TITLE TITLE NAME nathiri, ny NAME STREET ADDRESS STREET ADDRESS 307 E. KENNEDY BLVD. CITY-ST-ZIP CITY-ST-ZIP EATONVILLE FL 32751 Addition Change ☐ Delete TITLE ZIMMERMAN, DUANE NAME NAME STREET ADDRESS STREET ADDRESS 307 E. KENNEDY BLVD. CITY-ST-ZIP CITY-ST-ZIP EATONVILLE FL 32751 ☐ Delete TITI E Change Addition Johnson-Wright, Louise NAME NAME STREET ADDRESS STREET ADDRESS 307 E. KENNEDY BLVD. CITY-ST-ZIP CITY-ST-ZIP EATONVILLE FL 32751 □ Change ☐ Addition TITLE ☐ Delete TITI F ANDREWS, J. WILLIAM NAME NAME STREET ADDRESS STREET ADDRESS 307 E. KENNEDY BLVD. CITY-ST-ZIP CITY-ST-7IP EATONVILLE FL 32751 12. I hereby certify that the information supplied with this filling 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