

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2001 8:00 am
Secretary of State
 02-13-2001 90598 004 ****61.25

DOCUMENT # N09894

1. Entity Name

THE ESCAMBIA-SANTA ROSA BAR FOUNDATION, INC.

Principal Place of Business

Mailing Address

**30 W GOVERNMENT
 PENSACOLA FL 32501
 US**

**30 W GOVERNMENT
 PENSACOLA FL 32501
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2722183

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

**ECHSNER, STEPHEN H
 LEWIN MIDDLE BROOKS
 316 S BAYLEN ST
 PENSACOLA FL 32501**

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 NAME STREET ADDRESS CITY-ST-ZIP	VPD FARRAR, GREGORY 109 N PALAFOX ST, SUITE 1 PENSACOLA FL 32501	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD EMMANUEL, ROBERT 30 S SPRING ST PENSACOLA FL 32501	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ECHSNER, STEPHEN 316 S BAYLEN ST PENSACOLA FL 32501	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARSH, W. DOUGLAS 30 S SPRING ST PENSACOLA FL 32501	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRELL, SUSAN 11000 UNIVERSITY PKWY BLDG 50 PENSACOLA FL 32514	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUCHANAN, VIRGINIA 316 S BAYLEN ST PENSACOLA FL 32501	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-18-01 850-735-7118

CR2E037 (10/00)

Attachment
AUG 27 40

N09884

Name: John S. Bordelon Title: Director

Address: 2721 Gulf Breeze Pkwy.

City, State, ZIP: Gulf Breeze, FL 32561 Phone: 850-934-1000

Name: Diana Foote Title: Director

Address: 30 W. Government St.

City, State, ZIP: Pensacola, FL 32501 Phone: 850-434-8135

Name: Susan Wolfe Title: Director

Address: 226 Palafox Place

City, State, ZIP: Pensacola, FL 32501 Phone: 850-434-2411

Name: Debra Cooper Title: Director

Address: 6050 N. 9th Ave.

City, State, ZIP: Pensacola, FL 32504 Phone: 850-478-3409

Name: MARK A. Bednar Title: Director - Ex Officio

Address: 11 E. Zaragoza St.

City, State, ZIP: Pensacola, FL 32501 Phone: 850-433-6581

Name: Kramer Litvak Title: Director - Ex Officio

Address: 30 S. Spring St.

City, State, ZIP: Pensacola, FL 32501 Phone: 850-433-6581

Name: Theodore Soule Title: Director - Ex Officio

Address: 4300 Bayou Blvd. Ste. 12 & 13

City, State, ZIP: Pensacola, FL 32503 Phone: 850-436-7547

Name: Patricia Wright Title: Director - Ex Officio

Address: 2251 N. Palafox St.

City, State, ZIP: Pensacola, FL 32501 Phone: 850-595-6258