

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 700348

FILED
Jan 31, 2002 8:00 am
Secretary of State

01-31-2002 90033 004 ****61.25

1. Entity Name
THE FLORIDA STATE UNIVERSITY FOUNDATION, INC.

Principal Place of Business
**225 UNIV. CTR BLDG
STE 3100
TALLAHASSEE FL 32306
US**

Mailing Address
**225 UNIV CTR BLDG
STE 3100
TALLAHASSEE FL 32306
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-6152180**

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

**ROBISON, J. JEFFREY
225 UNIVERSITY CENTER, BLDG. C
STE 3100
TALLAHASSEE FL 32306**

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	CT HINKLE, CLIFFORD R 111 SMONROE ST STE 2003 TALLAHASSEE FL 32312	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT APTHORP, JAMES W JR 2901 BODIEAUX LANE TAMPA FL 33629	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT CAMERON, DIANNA L 225 UVIN CTR BLDG STE 3100 TALLAHASSEE FL 32306	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROBISON, J J 225 UNIV CTR BLDG, STE 3100 TALLAHASSEE FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GREENFIELD, ARNOLD L 3194 VIA ABITARE WAY, UNIT 19 COCONUT GROVE FL 33133	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS SPORES, MARILYN A 225 UVIN BLDG STE 3100 TALLAHASSEE FL 32306	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CT Apthorp, James W JR Collins Center for Public Policy, P.O. 1658 Tallahassee, FL 32302-1658	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT Keeven, Lynda Vizcaya At Feather Sound 2945 La Concha Dr Clearwater, FL 34622-2231	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT Hawkins, Tom 225 UVIN CTR Bldg STE 3100 Tallahassee, FL 32306	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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: Marilyn Spores Marilyn Spores 1/9/02 850-644-0834