

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2001 8:00 am
Secretary of State
 03-01-2001 90003 032 *****61.25

DOCUMENT # 706242

1. Entity Name

FLORIDA SCHOOL FOOD SERVICE ASSOCIATION, INC.

Principal Place of Business

**124 SALEM COURT
 TALLAHASSEE FL 32301**

Mailing Address

**124 SALEM COURT
 TALLAHASSEE FL 32301**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-6044207**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**RUDD, FRANK EXECUTOR DIRECTOR
 C/O FLORIDA SCHOOL SERVICE ASSOC
 124 SALEM COURT
 TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

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

TITLE	T	☒ Delete
NAME	JERO, LINDA	
STREET ADDRESS	3485 WILLIS RD	
CITY-ST-ZIP	MULBERRY FL 33860	
TITLE	S	☐ Delete
NAME	ADAMS, JUDY	
STREET ADDRESS	7720 W. OAKLAND BLVD, SUITE 204	
CITY-ST-ZIP	SUNRISE FL 33179	
TITLE	D	☐ Delete
NAME	RUDD, FRANK	
STREET ADDRESS	124 SALEM CT	
CITY-ST-ZIP	TALLAHASSEE FL 32301	
TITLE	PD	☒ Delete
NAME	GIRARD, BEVERLY	
STREET ADDRESS	101 OLD VENICE RD.	
CITY-ST-ZIP	OSPREY FL 34229	
TITLE	VD	☐ Delete
NAME	EHRHART, SUSAN	
STREET ADDRESS	445 EAST CLOWER STREET	
CITY-ST-ZIP	BARTOW FL 33830	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	T	☐ Change ☒ Addition
NAME	Art Dunham	
STREET ADDRESS	1530 Chaker Ridge	
CITY-ST-ZIP	Palm Harbor, FL 34683	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PD	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VD	☐ Change ☒ Addition
NAME	Judy Nixon	
STREET ADDRESS	7720 W. Oakland Pk Blvd Ste 204	
CITY-ST-ZIP	Sunrise FL 33351	

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Frank Rudd, Executive Director 850/878-1832
 Date **2-27-01** Daytime Phone #

CR2E037 (10/00)