

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 28, 2001 8:00 am**  
**Secretary of State**

04-28-2001 90050 049 \*\*\*\*61.25

001C-11

**DOCUMENT # 708262**

1. Entity Name

**CIVITAN FOUNDATION, INC.**

Principal Place of Business

**4343 IRVINGTON AVE  
JACKSONVILLE FL 32210  
US**

Mailing Address

**PO BOX 93  
JACKSONVILLE FL 32201  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**59-6161988**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**HUDSPETH, GEORGE L.  
10727 CROSSWICKS ROAD  
JACKSONVILLE FL 32256**

7. Name and Address of New Registered Agent

Name

**WALTER H BRINKMAN**

Street Address (P.O. Box Number is Not Acceptable)

**4343 IRVINGTON AVE**

City

**JACKSONVILLE****FL**

Zip Code

**32210**

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

*Walter H Brinkman Treas*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**4/19/01**

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 NAME STREET ADDRESS CITY-ST-ZIP	<b>PE BARRINGTON, ROBERT M 5234 LARRY DRIVE JACKSONVILLE FL 32216</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P BRINKMAN, WALTER 2327 COSTA VERO BLVD #201 JACKSONVILLE BEACH FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T HUDSPETH, GEORGE L. 10727 CROSSWICKS ROAD JACKSONVILLE FL 32256</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D BETTS, ANTONIA 904 ALCANTE RD ST AUGUSTINE FL 32086</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S HARWELL, GARY L 2545 WRIGHTSON DR JACKSONVILLE FL 32223</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D REVELS, GEORGE F. 6019 BROOKRIDGE ROAD JACKSONVILLE FL 32210</b>	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D BOB COGGINS 10325 MARBLE EGRET DR JACKSONVILLE FL 32257</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D HARRY A PIERRE, JR 227 W FORCYTHE ST JACKSONVILLE FL 32202</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD CLARA L WATKINS 2085 MILLS RD JACKSONVILLE FL</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D ROBERT L GITTINGS 4933 LONG BOW RD JACKSONVILLE FL 32210</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input checked="" 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

**4/19/01**

Date

**904 665 7902**

Daytime Phone #

CR2E037 (10/00)