

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 709491

1. Entity Name

MARTIN ANDERSEN-GRACIA ANDERSEN FOUNDATION, INC.

FILED
Feb 16, 2001 8:00 am
Secretary of State

02-16-2001 90005 035 ****61.25

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DO NOT WRITE IN THIS SPACE

Principal Place of Business 1717 EDGEWATER DRIVE P O BOX 547918 ORLANDO FLA 32854 US		Mailing Address P.O. BOX 3838 ORLANDO FL 32802 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address P. O. Box 547918 Suite, Apt. #, etc.	
City & State		City & State Orlando, FL 32854	
Zip	Country	Zip	Country
32854	USA	32854	USA
4. FEI Number 59-6166589		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SUNTRUST BANK OF CENTRAL FLORIDA 7TH FLOOR 200 SOUTH ORANGE AVENUE ORLANDO FL 32801		7. Name and Address of New Registered Agent Name Richard F. Trismen Street Address (P.O. Box Number is Not Acceptable) 213 West Comstock Avenue City Winter Park FL Zip Code 32789	
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 <i>Richard F. Trismen</i> Richard F. Trismen, Secretary DATE 2/13/01 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PD ANDERSEN, GRACIA B. 1717 EDGEWATER DR. ORLANDO FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Deceased <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WARLOW III, THOMAS P PO BOX 547163 ORLANDO FL 32854 <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	DS TRISMEN, R.F. 213 WEST COMSTOCK AVENUE WINTER PARK FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Trismen, Richard F. 213 West Comstock Avenue Winter Park, FL 32789 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	B HAMES, CLIFFORD 780 WILLIAMS DRIVE WINTER PARK FL 32789 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Hames, Clifford M. 780 Williams Drive Winter Park, FL 32789 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BARR JR, L GRAHAM 1819 BEACON STREET NEW SMYRNA BEACH FL <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"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sessions, Gail Warlow P. O. Box 606 Woodville, Mississippi 39669 <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: <i>Richard F. Trismen</i> Richard F. Trismen, Secretary		407-647-5654	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

CR2E037 (10/00)