## 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 714180 1. Entity Name GEORGE B. CARTER FOUNDATION, INC. Mailing Address Principal Place of Business PO BOX 628600 6545 CORPORATE CENTRE BLVD. ORLANDO FL 32822 ORLANDO FL 32862-8600 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number 59-6216204 Zip Country Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) KNOX, R. JAMES 6545 CORPORATE CENTRE BLVD. ORLANDO FL 32822 City 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) 9. Election Campaign Financing **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees **FEE IS \$61.25** OFFICERS AND DIRECTORS 11. 10. Delete TITLE TITLE NAME TRINKLE, ROBERT S NAME STREET ADDRESS STREET ADDRESS 121 COLLINS ST CITY-ST-ZIP CITY-ST-ZIP PLANT CITY FL □ Defete TITLE TITLE NAME NAME ZSCHAU, JULIUS J STREET ADDRESS STREET ADDRESS 28050 US HWY 19. N CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL

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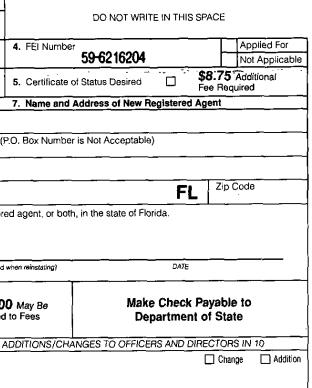
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## **FILED** May 04, 2000 8:00 am Secretary of State

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CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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 empow

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JONES, JIMMY R.

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