

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 714220

1. Entity Name

FLORIDA CHAMBER OF COMMERCE FOUNDATION, INC.

Principal Place of Business

136 S BRONOUGH ST
TALLAHASSEE FL 32301-7706

Mailing Address

P. O. BOX 11309
TALLAHASSEE FL 32302-3309
US

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

59-6209605

Applied For

Not Applicable

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

CASSELS, LEON H
136 S. BRONOUGH ST
TALLAHASSEE FL 32031

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 P ☐ Delete
NAME RYLL, FRANK M JR.
STREET ADDRESS 136 S. BRONOUGH ST
CITY-ST-ZIP TALLAHASSEE, FL 00000

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE EVP ☐ Delete
NAME CASSELS, LEON
STREET ADDRESS 136 S. BRONOUGH ST.
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME GOODE, R.R.
STREET ADDRESS 3600 NW 82 AVE.
CITY-ST-ZIP MIAMI FL

TITLE D ☐ Change ☒ Addition
NAME McBride, Bill
STREET ADDRESS P.O. Box 1288
CITY-ST-ZIP Tampa, FL 33601-1288

TITLE T ☐ Delete
NAME CASSELS, LEON H
STREET ADDRESS 136 S. BRONOUGH ST.
CITY-ST-ZIP TALLAHASSEE FL 32301

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME PEDDIE, EDWARD
STREET ADDRESS 136 S. BRONOUGH ST.
CITY-ST-ZIP TALLAHASSEE FL 32301-7706

TITLE D ☐ Change ☒ Addition
NAME Davis, Pamela
STREET ADDRESS 12425 28 Street North #103
CITY-ST-ZIP St. Petersburg, FL 33716

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME Dye, Michael
STREET ADDRESS 2001 NW 107 Avenue
CITY-ST-ZIP Miami, FL 33172-2507

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 *Leon H. Casseles* LEON H. CASSELES, Treasurer 4/3/2000

850-521-1211

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)



DO NOT WRITE IN THIS SPACE