2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 16, 2002 8:00 am
Secretary of State
05-16-2002 90010 034 ****70.00

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DO NOT WRITE IN THIS SPACE

1. Entity Name

UMATILLA BAND AIDES ASSOCIATION, INC.

Principal Place of Business	Mailing Address
TROWELL,AVE P.O. BOX 1601 UMATILLA FL 32784	TROWELL AVE P.O. BOX 1601 UMATILLA FL 32784

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 44-2068130 ☐ 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
PANTKE, DAWN E 4222 OAKBERRY DRIVE ORLANDO FL 32817	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 Dawn E. Pantke 4.24.01
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	SD RANSOM, GERRY PO BOX 502 UMATILLA FL 32784	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D- Gerry Ransom P.O. Box 502 Umatilla Fl 32784 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MERRITT, CINDY 24973 CR 42 PAISLEY FL 32767	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D-JOANN Parker Treasurer 49130 CR 439 Umatilla, FL 32784 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MCCALL, KELLY 4005 CENTRAL AVE UMATILLA FL 32784	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D-Vice-President Pamela Falconer 42529 Maggie Jones Rd. Paisley, FL 32767 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SCHICHTEL, TERRY PO BOX 1 UMATILLA FL 32784	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D- Brenda D Fry 32450 W. Murphy Rd Umatilla, Fl 32784 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P WUNSCH, JUDYTH L PO BOX 272 UMATILLA FL 32784	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D- Lois Quinn 43651 Gracie Dr. Paisley, Fl 32767 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP FREBE, JEANINE 40717 MARQUETTE RD UMATILLA FL 32784	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D-President Jeanine Frebe 40717 Marquette Rd. Umatilla, FL 32784 ☑ Change ☐ Addition

CR2E037 (9/01)

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: Cindy Lou McDonald 4.24.02 352-669-7325
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #