

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 730206**

1. Entity Name

**THE HILLSBOROUGH COMMUNITY COLLEGE FOUNDATION, I
NC.**

Principal Place of Business

**39 COLUMBIA DRIVE
P.O.BOX 31127 (336313127)
TAMPA FL 33606**

Mailing Address

**39 COLUMBIA DRIVE
P.O.BOX 31127 (336313127)
TAMPA FL 33606**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1810717

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**SALEM, RICHARD J
101 EAST KENNEDY BLVD
SUITE 3200
TAMPA FL 33602**

7. Name and Address of New Registered Agent

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 \$61.259. 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	Delete
D	MEHLTRETTER, JAMES R	39 COLUMBIA DR	TAMPA FL	☒
VD	GARCIA, ROBERT P.	39 COLUMBIA DR.	TAMPA FL	☒
TD	FEE, RICHARD	39 COLUMBIA DR	TAMPA FL	☒
CD	FERNANDEZ, ERNEST J	39 COLUMBIA DR	TAMPA FL	☐
SD	MINCEY, KAREN M	39 COLUMBIA DR	TAMPA FL	☐
M	LEONARD, GERALD M	39 COLUMBIA DR	TAMPA FL	☐

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
C/D	Proctor, Mark	39 Columbia Drive	Tampa, FL 33606	☐	☒
V/D	Mincey, Karen M.	39 Columbia Drive	Tampa, FL 33606	☒	☐
T/D	Peterson, Charles F. Jr.	39 Columbia Drive	Tampa, FL 33606	☐	☒
S/D	Fralick, Frank E.	39 Columbia Drive	Tampa, FL 33606	☐	☒
D	Fernandez, Ernest Jr.	39 Columbia Drive	Tampa, FL 33606	☒	☐
				☐	☐

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gerald M. Leonard 01/11/02 (813) 253-7014

Date

Daytime Phone #

FILED
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90125 030 ****61.25



DO NOT WRITE IN THIS SPACE

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