| 2001 UNIFORM BUSINESS REPORT DOCUMENT # 730912 | | | | (UBR) FILED Jan 17, 2001 8:00 Secretary of Stat | | am te | |
|---|---|---|---|--|---|---|---|
| THE EVERETT | AND ALICE HESS FA | Mily Fund, Inc. | | | 01-17-2001 90002 02 | | |
| Principal Place of Busi | ness | Mailing Address | | | | | |
| 3505 CAMINO DEL RIO SOUTH 240 SAN DIEGO CA 92108 US 2. Principal Place of Business Suite, Apt. #, etc. City & State | | 3505 CAMINO DEL RIO SOUTH 240 SAN DIEGO CA 92108 US 3. Mailing Address Suite, Apt. #, etc. City & State | | | 0.0.0 | | |
| | | | | | 602580 | | |
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| | | | | 4. FEI Number 23-7396909 Applied For Not Applicable | | | |
| Zip | Country | Zip | Country | 5. Certificate | of Status Desired | \$8.75 Add | itional |
| 6. N | ame and Address of Current | Registered Agent | | 7. Name and Address of New Registered Agent | | | |
| | • | | - Name Street Add | dress (P.O. Box Numb | er is Not Acceptable) | | <u> </u> |
| YANNO, ROBERT 4220 UNIVERSITY DR CORAL GABLES FL 33146 | | City | | | | | |
| | | | | | F | Zip Cod | <u> </u> |
| | | | 1, | | | | |
| SIGNATURE | entity submits this statement fo | and title if applicable. (NC | ts registered office or re | a required when reinstating) | th, in the state of Florida. | | |
| SIGNATURE | · | | ts registered office or re DTE: Registered Agent signature gn Financing | | th, in the state of Florida. | Payable to | |
| SIGNATURE | yped or printed name of registered agent | and title if applicable. (NC 9. Election Campaig Trust Fund Contri RECTORS | ts registered office or re DTE: Registered Agent signature gn Financing | s required when reinstating) \$5.00 May Be Added to Fees | th, in the state of Florida. DATE Make Check | Payable to It of State | 10 |
| SIGNATURE | yped or printed name of registered agent LE NOW: IS \$61.25 OFFICERS AND DI | and title if applicable. (NC 9. Election Campaig Trust Fund Contri | ts registered office or re DTE: Registered Agent signature gn Financing ibution. | s required when reinstating) \$5.00 May Be Added to Fees | th, in the state of Florida. DATE Make Check Departmer | Payable to | |
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