

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 23, 2002 8:00 am
Secretary of State

07-23-2002 90333 033 ****61.25

DOCUMENT # 731211

1. Entity Name

FORT WALTON BEACH HOSPITAL AUXILIARY, INC.

Principal Place of Business

Mailing Address

FT. WALTON BCH. HOSPITAL AUXILIARY, INC.
 LBJ SR. DRIVE
 FORT WALTON BEACH FL 32548

FT. WALTON BCH. HOSPITAL AUXILIARY, INC.
 LBJ SR. DRIVE
 FORT WALTON BEACH FL 32548

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

56-1037304

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

ANCHORS, C. LEDON
909 MAR WALT DRIVE SUITE 1014
FT WALTON BEACH FL 32547

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
min. will be \$236.25.

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 PD ☒ Delete
 NAME COOPER, IRENE
 STREET ADDRESS 4 B VIKING DR
 CITY-ST-ZIP FT WALTON BEACH FL 32458

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

TITLE VD ☐ Delete
 NAME ELLIS, KATHERYN
 STREET ADDRESS 390 YANCY ST
 CITY-ST-ZIP FORT WALTON BEACH FL 32547

TITLE PD ☒ Change ☐ Addition
 NAME ELLIS, KATHERYN
 STREET ADDRESS 1822 COTTENTREE Ct.
 CITY-ST-ZIP Box 10 FORT WALTON BEACH, FL 32547

TITLE SD ☐ Delete
 NAME ELLIS, JAN
 STREET ADDRESS 11 CHELSA DR
 CITY-ST-ZIP FORT WALTON BEACH FL 32547

TITLE VSD ☒ Change ☐ Addition
 NAME ELLIS, JAN
 STREET ADDRESS 11 CHELSA Dr.
 CITY-ST-ZIP FORT WALTON BEACH FL. 32547

TITLE TD ☐ Delete
 NAME BAZZELL, HELEN
 STREET ADDRESS 421 PELHAM RD
 CITY-ST-ZIP FORT WALTON BEACH FL 32547

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

TITLE VD ☒ Delete
 NAME IRENE COOPER
 STREET ADDRESS 4 B VIKING DR
 CITY-ST-ZIP FT WALTON BEACH FL

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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 Helen Bazzell**

July 20-02 850-862-2051

CR2E037 (4/02)