

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 748930

1. Entity Name

CARL S. SWISHER FOUNDATION INC.

FILED

Jan 30, 2002 8:00 am  
Secretary of State

01-30-2002 90110 036 \*\*\*\*61.25

Principal Place of Business

Mailing Address

1301 RIVERPLACE BLVD.  
#2640  
JACKSONVILLE FL 32207  
US

1301 RIVERPLACE BLVD.  
#2640  
JACKSONVILLE FL 32207  
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

59-0998262

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ANDERSON, KENNETH G  
1301 RIVERPLACE BLVD  
#2640  
JACKSONVILLE FL 32207

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 ☐ Delete  
NAME D  
STREET ADDRESS LINDSEY, JOHN H.  
CITY-ST-ZIP 13840 MANDARIN ROAD  
JACKSONVILLE FL

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

TITLE ☐ Delete  
NAME DP  
STREET ADDRESS ANDERSON, KENNETH G.  
CITY-ST-ZIP 2951 FRONT RD  
JACKSONVILLE, FL 00000

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

TITLE ☐ Delete  
NAME DTS  
STREET ADDRESS CHARBONNET, CAROLINE  
CITY-ST-ZIP 4418 COUNTRY CLUB ROAD  
JACKSONVILLE FL

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

TITLE ☐ Delete  
NAME D  
STREET ADDRESS STEVENS, JAMES P  
CITY-ST-ZIP 933 GRANADA BOULEVARD S  
JACKSONVILLE FL 32207

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E037 (9/01)

*Attachment*  
*# 748930*  
*719915*  
Carl S. Swisher Foundation, Inc.  
P.O. BOX 14790  
JACKSONVILLE, FLORIDA 32238

Please reply to:

- ☐ P.O. Box 14790  
Jacksonville, Florida 32238
- ☒ 1301 Riverplace Boulevard  
Suite 2640  
Jacksonville, Florida 32207

January 15, 2002

Certified Mail  
Return Receipt Requested

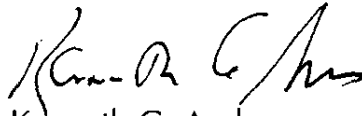
Uniform Business Report Filings  
Division of Corporations  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

Re: Carl S. Swisher Foundation Inc.  
2002 Uniform Business Report  
Document # 748930

Dear Sirs:

We enclose the Form 2002, Uniform Business Report Form for the Carl S. Swisher Foundation, Inc., federal employer identification number 59-0998262. In addition, we enclose our firm check in the amount of \$61.25, payable to the Department of State, in payment of the filing fee for this form.

Sincerely yours,

  
Kenneth G. Anderson  
President

KGa/ccr

Enclosures as Stated