5/21/01-90343-00(

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 21, 2001 8:00 am
Secretary of State
05-21-2001 90343 006 ****61.25

DOCUMENT # 763927

1. Entity Name

GRANT-A-WISH FOUNDATION OF NORTHWEST FLORIDA, IN

Principal Place of Business	Mailing Address
P.O. BOX 1122 ~~P.O. BOX 12584~~ GULF BREEZE FL 32562 US	P.O. BOX 1122 ~~P.O. BOX 12584~~ GULF BREEZE FL 32562 US

DO NOT WRITE IN THIS SPACE

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 59-2224986 ☐ 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
BROWN, GERALD L 30 S SPRING STREET P.O. BOX 12584 PENSACOLA FL 32501	Name Deborah Munro Street Address (P.O. Box Number is Not Acceptable) ~~PO Box 1122~~ 4416 Eastpointe Dr City ~~Gulf Breeze~~ Pensacola FL Zip Code ~~32562~~ 32514

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 Deborah Munro 5-15-01
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	TD BROWN, GERALD L 30 S SPRING STREET PENSACOLA, FL 00000	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Deborah Munro 4416 E. Pointe Dr Pensacola FL 32514	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CABASSA, RONALD S. 2635 VENETIAN WAY GULF BREEZE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Anna Barbee 307 Valencia St Gulf Breeze FL 32561	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMARR, LINDA A. 2275 SCENIC HWY. #131 PENSACOLA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Carol Fuller 8504 Punta Lora Pensacola FL 32514	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Carla Daddph 3232 Quiet Water Lane Gulf Breeze FL 32561	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: Deborah Munro REQUIRED 5-15-01 850 444-6720
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #