

2002 UNIFORM BUSINESS REPORT (UBR)

1/3

FILED
Mar 14, 2002 8:00 am
Secretary of State

01-31-2002 90072 039 *****61.25

DOCUMENT # 768381

1. Entity Name

THE WINTER PARK GOOD GOVERNMENT GROUP, INC.

Principal Place of Business

Mailing Address

834 ANTONETTE AVE
 WINTER PARK FL 32789
 US

P O BOX 746
 WINTER PARK FL 32790
 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

59-2916122

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

BAUMAN, WILLIAM A
 1850 LEGION DRIVE
 WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name **KURTZ, JUDY**

Street Address (P.O. Box Number is Not Acceptable)
800 MCINTYRE AVE

City **WINTER PARK**

FL

Zip Code
32789

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: *Judith C. Kurtz*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

10 January 2002

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

TITLE	VD	<input type="checkbox"/> Delete
NAME	SANDERS, MARGARET S	
STREET ADDRESS	641 WILLIAMS DR	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE	D	<input type="checkbox"/> Delete
NAME	KURTZ, JUDY	
STREET ADDRESS	800 MCINTYRE AVE	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE	TD	<input type="checkbox"/> Delete
NAME	BAUMAN, WILLIAM A	
STREET ADDRESS	1850 LEGION DRIVE	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE	PD	<input type="checkbox"/> Delete
NAME	WILSON, STANLEY	
STREET ADDRESS	834 ANTONETTE AVENUE	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE	SD	<input type="checkbox"/> Delete
NAME	MCKECHNIE, FRANKLIN	
STREET ADDRESS	1620 MAYFLOWER COURT	
CITY-ST-ZIP	WINTER PARK FL 32792	
TITLE	D	<input type="checkbox"/> Delete
NAME	RANDALL, JANICE R	
STREET ADDRESS	1457 WILLIAMS DRIVE	
CITY-ST-ZIP	WINTER PARK FL 32789	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KURTZ, JUDY	
STREET ADDRESS	800 MCINTYRE AVE	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAUMAN, WILLIAM A	
STREET ADDRESS	1850 LEGION DRIVE	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Judith C. Kurtz
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/14/02

407 629-7119

CR2E037 (9/01)