

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90140 014 ****61.25

DOCUMENT # F00000003838

1. Entity Name

THE SPRINGBORN FAMILY FOUNDATION, INC.



Principal Place of Business

**4601 GULF SHORE BLVD NORTH
NAPLES FL 34103**

Mailing Address

**C/O GOODMAN & BREEN
3838 TAMiami TRAIL N SUITE 300
NAPLES FL 34103**

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 **36-4198540**

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

**GOODMAN & BREEN
3838 TAMiami TRAIL NORTH
SUITE 300
NAPLES FL 34103**

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PCD
SPRINGBORN, CAROLYN J
4601 GULF SHORE BLVD NORTH
NAPLES FL** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VTD
SPRINGBORN, ROBERT C
4601 GULF SHORE BLVD NORTH
NAPLES FL** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
SPRINGBORN, DEBORAH L
3342 VILLAGE COURT
CAMERON PARK CA** ☐ Delete

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

TITLE
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STREET ADDRESS
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☐ Change ☐ Addition

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: *Carolyn J. Springborn*

RECEIVED

CR2E037 (10/02)

Attachment

70028037
FO0000003858

Goodman Breen & Gibbs

ATTORNEYS AT LAW

*Dorothy M. Breen**
*Nancy J. Gibbs**
*Kenneth D. Goodman**

3838 Tamiami Trail North, Suite 300
Naples, Florida 34103
(239) 403-3000
Fax (239) 403-0010

**Board Certified Attorney in
Wills, Trusts & Estates Law*

March 12, 2003

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

Re: Springborn Family Foundation

Dear Sir/Madam:

Enclosed for filing is the 2003 Uniform Business Report for the above reference foundation.

Sincerely,



Linda Bond
Legal Assistant

Enclosure