## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

## FILED DOCUMENT # F92000000972 Sep 18, 2000 8:00 am 1. Entity Name Secretary of State DALTON FOUNDATION INC. 09-18-2000 90035 049 \*\*\*\*70.00 Principal Place of Business Mailing Address 1100 5TH AVE S 1100 5TH AVE S SUITE 301 SUITE 301 NAPLES FL 34102 NAPLES FL 34102 3. Mailing Address 2. Principal Place of Business P.O. BOX 2782 <u>27 Main Street</u> Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 102 City & State Applied For 4, FEI Number Edwards, CO 22-3146570 Not Applicable Country USA Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired 81632 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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) ١ FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Pavable to Trust Fund Contribution. After September 13, 2000 min. will be \$236.25 Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PD TITLE ☐ Delete TITLE Addition DALTON, TIMOTHY G. JA DALTON, TIMOTHY G JR NAME NAME P.O. Box 2782 STREET ADDRESS 1100 5TH AVE S SUITE 301 STREET ADDRESS Edwards, CO 81632 CITY-ST-ZIP NAPLES FL CITY-ST-ZIP STD Delete Change ☐ Addition TITLE TITLE Dalton JULIE M DALTON, JULIE M NAME NAME P.O. BOX 2782 1100 FIFTH AVE S SUITE 301 STREET ADDRESS STREET ADDRESS Edwards CO 81632 CITY-ST-ZIP NAPLES FL CITY-ST-ZIP Change ☐ Addition TITLE TITI F ☐ Delete Palton, ALISON M DALTON, ALISON M NAME NAME 201 shelley Ave 7406 CASTLETON FARMS, N. DRIVE STREET ADDRESS STREET ADDRESS Campbell'. CA CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 46256 TITLE ☐ Addition TITLE ☐ Delete ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

Julie Dalton

970.926.7120