

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000000368

1. Entity Name

FUND RAISING AND MANAGEMENT COUNSEL, INC.

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90156 003 ***150.00

900498



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

2901 PIEDMONT RD.
ATLANTA GA 30305

2901 PIEDMONT RD.
ATLANTA GA 30341-4148

2. Principal Place of Business

2900 Chamblee-Tucker Rd.

3. Mailing Address

2900 Chamblee-Tucker Rd.

Suite, Apt. #, etc.

Bldg. #16

Suite, Apt. #, etc.

Bldg. #16

City & State

Atlanta, GA

City & State

Atlanta, GA

Zip
30341

Country
USA

Zip
30341

Country
USA

4. FEI Number

57-0846432

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DUCHEMIN, CLAIRE A
3837-A KILLEARN COURT
TALLAHASSEE FL 32308

7. Name and Address of New Registered Agent

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

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE CPT
NAME DORADO, JANET
STREET ADDRESS 1439 SHERIDAN WALK NE
CITY-ST-ZIP ATLANTA GA 30324 ☐ Delete

TITLE CVS
NAME KELLY, DOUG
STREET ADDRESS 1304 SHERIDAN ROAD
CITY-ST-ZIP ATLANTA GA 30324 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Janet Dorado* JANET DORADO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/00 (770) 457-6077
Date Daytime Phone #

CR2E034 (9/99)