

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

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90106 008 ****61.25

DOCUMENT # F95000002815

1. Entity Name

GIFTS IN KIND AMERICA, INC.



Principal Place of Business

**333 N. FAIRFAX ST.
ALEXANDRIA VA 22314**

Mailing Address

**333 N. FAIRFAX ST.
ALEXANDRIA VA 22314**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **54-1282616**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

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
**AT
LAWRENCE, MARY ANN
333 N. FAIRFAX ST
ALEXANDRIA VA 22314** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
RODEK, JEFFREY R
1344 CROSSMAN AVENUE
SUNNYVALE CA 94089** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
WEINBERGER, ESQ. M
1150 17TH ST NW #601
WASHINGTON DC 20036** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ANDERSON, BARRY R.
6450 VIA REAL
CARPINTERIA CA 93013** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WAEEL H. ABURIDA
2200 MISSION COLLEGE BLVD.
SANTA CLARA, CA 95052-8119** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
CORRIGAN, SUSAN
700 N. FAIRFAX
ALEXANDRIA VA 22314** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
APPLE, SUZANNE
2455 PACES FERRY RD NW
ATLANTA GA 30339** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
RAYNA AYLWARD
1560 WILSON BLVD
ARLINGTON, VA 22209** ☐ 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:

MARY ANN LAWRENCE
CHIEF FINANCIAL OFFICER 4/30/03 703-299-7565

CR2E037 (10/02)

attachment

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59 5000002815

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February 28, 2003

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