

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

**FILED**  
**Mar 06, 2003 8:00 am**  
**Secretary of State**

03-06-2003 90132 008 \*\*\*\*70.00

**DOCUMENT # N00000000794**

1. Entity Name

**SUNSHINE STATE COMMUNITY FOUNDATION, INC.**



Principal Place of Business

**1964 HOWELL BRANCH RD.,STE.107  
WINTER PARK FL 32792**

Mailing Address

**1964 HOWELL BRANCH RD.,STE.107  
WINTER PARK FL 32792**

**10056604**

2. Principal Place of Business

**2154 Park Maitland Ct.**  
Suite, Apt. #, etc.

3. Mailing Address

**2154 Park Maitland Court**  
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

**Maitland, FL**  
Zip **32751** Country **US**

City & State

**Maitland, FL**  
Zip **32751** Country **US**

4. FEI Number **59-3642252**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**RIDDLE, W. JOHN IV**  
**1964 HOWELL BRANCH RD.,STE.107**  
**WINTER PARK FL 32792**

7. Name and Address of New Registered Agent

Name **Riddle, W. John IV**  
Street Address (P.O. Box Number is Not Acceptable)  
**2154 Park Maitland Court**  
City **Maitland** FL Zip Code **32751**

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD</b> <b>RIDDLE, W. JOHN IV</b> <b>1964 HOWELL BRANCH RD.,STE.107</b> <b>WINTER PARK FL 32792</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>SEBASTIAN, JOHN E</b> <b>1964 HOWELL BRANCH RD.,STE.107</b> <b>WINTER PARK FL 32792</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD</b> <b>MASSA, KATHERINE B</b> <b>1964 HOWELL BRANCH RD.,STE.107</b> <b>WINTER PARK FL 32792</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>2154 Park Maitland Court</b> <b>Maitland, FL 32751</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>2154 Park Maitland Court</b> <b>Maitland, FL 32751</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>2154 Park Maitland Court</b> <b>Maitland, FL 32751</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

**SIGNATURE REQUIRED**

**3/3/03 407-673-6300**

CR2E037 (10/02)