

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-05-2001 90009 016 ****61.25

DOCUMENT # N00000001566

1. Entity Name

THE BORN FAMILY FOUNDATION, INC.

Principal Place of Business

**3968 TORREY PINES BLVD.
SARASOTA FL 34238**

Mailing Address

**3968 TORREY PINES BLVD.
SARASOTA FL 34238**

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

65-0988691

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

**BORN, KENNETH W
3968 TORREY PINES BLVD.
SARASOTA FL 34238****D BORN, JEFFREY E
120 CAMMERON CIRCLE
AURORA, IL 60504**

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 state 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
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PTD	<input type="checkbox"/> Delete
NAME	BORN, KENNETH W	
STREET ADDRESS	3968 TORREY PINES BLVD.	
CITY-ST-ZIP	SARASOTA FL 34238	
TITLE	VSD	<input type="checkbox"/> Delete
NAME	BORN, JANE L	
STREET ADDRESS	3968 TORREY PINES BLVD.	
CITY-ST-ZIP	SARASOTA FL 34238	
TITLE	D	<input type="checkbox"/> Delete
NAME	HANAN, BENJAMIN R	
STREET ADDRESS	240 S. PINEAPPLE AVE., 10TH FLOOR	
CITY-ST-ZIP	SARASOTA FL 34238	
TITLE	D	<input type="checkbox"/> Delete
NAME	BORN, GREGORY D	
STREET ADDRESS	461 HAMILTON	
CITY-ST-ZIP	WHEATON IL 60187	
TITLE	D	<input type="checkbox"/> Delete
NAME	PANKO, KATHRYN J	
STREET ADDRESS	1453 FARGO BLVD.	
CITY-ST-ZIP	GENEVA IL 60134	
TITLE	D	<input type="checkbox"/> Delete
NAME	RAWLS, KAREN A	
STREET ADDRESS	18 DUCK HOOK CR.	
CITY-ST-ZIP	LAKE WYLIE SC 29710	

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BORN, JEFFREY E	
STREET ADDRESS	120 CAMMERON CIRCLE	
CITY-ST-ZIP	AURORA, IL 60504	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kenneth W. Born**2/4/01****941-922-5564**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)