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

DOCUMENT # N0000002087

KREWE OF FORT BROOKE FOUNDATION, INC.



FILED Feb 07, 2003 8:00 am Secretary of State
02-07-2003 90105 033 ****61.25

1	ace of Business	Mailing Address					
500 N WESTSHORE BLVD. SUITE 850 TAMPA FL 33609		500 N WESTSHORE BLVD. SUITE 850 TAMPA FL 33609					
O Deinstell				i 1 8 1 2 (18 18 18 18 18 18 18 18 18 18 18 18 18 1	PRANCONIA CON CONTRACTOR CONTRACTOR		
Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.					
					CHECK HERE IF MAKING CHANGES		
City & Sta	SUITE 625		<u>u 625</u>			G CHANGI	ES
City & Sta	ate	City & State		4. FEI Number	9-3119802		Applied For
Zip	Country	Zip	00				Not Applicable
		Ζίρ	Country	5. Certificate of S	Status Desired	\$8.75	
	6. Name and Address of Current F	egistered Agent	1	7. Name and Ad	dress of New Registered	Fee Requ	ired
		months of the second	Name	- Andreas - An		Agent	· · · · · · · · · · · · · · · · · · ·
	T, STANLEY T		Street A			<u>, </u>	
	ENNEDY BLVD, SUITE 1207		- Olicel A	Street Address (P.O. Box Number is Not Acceptable)			
IAMPA I	FL 33602						
			City			Zip Co	
8. The above	e named entity submits this statement for				FL		
the obliga	e named entity submits this statement for ations of registered agent.	me harbose or cuanging its r	egistered office or	registered agent, or both, in	the State of Florida. I am	familiar witl	h, and accept
SIGNATURE							
	Signature, typed or printed name of registered agent and	title if applicable. (NOTE:	Registered Agent signatu	re required when reinstating)	DATE		_
					3702		
	FILE NOW: FEE IS \$61 25	9. Election Cam	paign Financing	\$5.00 u. s	Make Cheel	e Daveble	- 4-
I	FILE NOW: FEE IS \$61.25	9. Election Cam Trust Fund Co		\$5.00 May Be Added to Fees	Make Check	Reyable	e to State
	***	Trust Fund Co	ontribution.	Added to Fees	Florida Depar	tment of	State
10.	OFFICERS AND DIRE	Trust Fund Co		Added to Fees	Make Check Florida Depart	tment of	State
	OFFICERS AND DIRE	Trust Fund Co	11.	Added to Fees	Florida Depar	tment of	State N 10
10. TITLE NAME	OFFICERS AND DIRE PD KIRCHEN, RICHARD	Trust Fund Co	11. TITLE NAME	Added to Fees	Florida Depar	RECTORS I	State N 10
10. TITLE NAME STREET ADDRESS	OFFICERS AND DIRE PD KIRCHEN, RICHARD 5005 S ELBERON ST	Trust Fund Co	11. TITLE NAME STREET ADDRESS	Added to Fees	Florida Depar	RECTORS I	State N 10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PD KIRCHEN, RICHARD	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees	Florida Depar	tment of	State N 10 Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DIRE PD KIRCHEN, RICHARD 5005 S ELBERON ST TAMPA FL 33611 VD BRAY, TODD	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees	Florida Depar	RECTORS I	State N 10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIRE PD KIRCHEN, RICHARD 5005 S ELBERON ST TAMPA FL 33611 VD BRAY, TODD BRISTOL AVE #103	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees	Florida Depar	tment of	State N 10 Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PD KIRCHEN, RICHARD 5005 S ELBERON ST TAMPA FL 33611 VD BRAY, TODD BRISTOL AVE #103 TAMPA FL 33609	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees	Florida Depar	tment of	State N 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIRE PD KIRCHEN, RICHARD 5005 S ELBERON ST TAMPA FL 33611 VD BRAY, TODD BRISTOL AVE #103 TAMPA FL 33609 CD	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees	Florida Depar	RECTORS I Change	N 10 ☐ Addition ☐ Addition
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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

SIGNATURE:

1/6/03

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