2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all

SIGNATURE:

Mar 08, 2001 8:00 am Secretary of State DOCUMENT # N0000002231 03-08-2001 90085 007 ****61.25 THE BEACON FOUNDATION, INC. Principal Place of Business Mailing Address 731 EAST RFAIRLANE AVENUE 731 EAST RFAIRLANE AVENUE ORLANDO FL 32809 ORLANDO FL 32809 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 3662585 Not Applicable _ Zip Country_ . _ _Zip __ - ___ -Country \$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) KILPATRICK, JOSEPH 731 EAST RFAIRLANE AVENUE ORLANDO FL 32809 City Zip Code 8. The above named entity submits this statement for the purpose of phanging its registered office or registered agent, or both, in the state of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Department of State FEE IS \$61.25 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. D TITLE ☐ Delete TITLE ☐ Change ☐ Addition CARNS, CHUCK NAME NAME 731 EAST RFAIRLANE AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32809 TITLE □ Delete TITLE Change ☐ Addition CENICOLA, TONY NAME NAME STREET ADDRESS .731 EAST-RFAIRLANE AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32809 TITLE TITLE ☐ Change ☐ Addition Delete NAME DEARRIGOITIA, ERIC NAME STREET ADDRESS 731 EAST RFAIRLANE AVENUE STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32809 CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition KILPATRICK, JOSEPH NAME STREET ADDRESS 731 EAST RFAIRLANE AVENUE STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32809 CITY-ST-ZIP Delete TITLE Change ■ Addition TITLE KUCK, DUANE NAME NAME STREET ADDRESS 731 EAST RFAIRLANE AVENUE STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32809 CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ■ Addition MELOON, GARY NAME NAME 731 EAST RFAIRLANE AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ORLANDO FL 32809 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