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

DOCUMENT # N0000002938

1. Entity Name

THE HEIGHTS FOUNDATION, INC.



FILED Apr 18, 2003 8:00 am Secretary of State

04-18-2003 90125 010 ****61.25

| Principal Pla | ce of Business | Mailing Address | | | | | |
|--|--|--|-------------------------------|--|---|-----------------|------------|
| 15775 PINE RIDGE ROAD FORT MYERS FL 33908 | | 15775 PINE RIDGE ROAD FORT MYERS FL 33908 | | | , | | |
| | | • | | | ##### ## ### ## ### ## ### ## ### ## ### | # 12010 10100 1 | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | CHECK HERE IF MAKING CHANGES | | |
| City & State | | City & State | | 4. FEI Number | 4. FEI Number 65-1003872 Applied For Not Applied | | |
| Zip | Country | Zip | Country | 5. Certificate of | | \$8.75 Ad | Iditional |
| | 6. Name and Address of Current | Registered Agent | | 7. Name and A | ddress of New Registered A | | <u> </u> |
| | and the second second | The same of the sa | Name | or or the second | | | |
| | KATHRYN | | Street / | Street Address (P.O. Box Number is Not Acceptable) | | | |
| | ine Ridge Road Yers FL 33908 | | <u> </u> | | | | |
| FURIN | 1ENO FL 33506 | | | | | | |
| | | | City | | FL | Zip Cod | le |
| 8. The above | e named entity submits this statement for | or the purpose of changing its | registered office of | or registered agent, or both, | in the State of Florida. I am fa | amiliar with, | and accept |
| the obliga | tions of registered agent. | | | , | | | |
| CIONIATURE | - * | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered agent | and title if applicable. (NOT | E: Registered Agent signa | ture required when reinstating) | DATE | | |
| 9. Election Campa Trust Fund Conf | | | | \$5.00 May Be Added to Fees | Make Check Florida Departi | | |
| 10. | OFFICERS AND DI | RECTORS | 11. | | GES TO OFFICERS AND DIR | ECTORS IN | V 10 |
| TITLE | PO | ☐ Delete | TITLE | VPD | | Change | ☐ Addition |
| NAME STREET ADDRESS | KELLY, KATHRYN | | NAME OXECT APPRECE | Bonnie Gra | ham | | |
| CITY-ST-ZIP | 16520 SHAMROCK LANE FORT MYERS FL 33908 | | STREET ADDRESS CITY-ST-ZIP | Bonnie Gra B61 Cypress Fort Myers, | tare circo | | |
| TITLE | VPD | Delete | TITLE | TOPT MYES, | | ☐ Change | Addition |
| NAME | BECK, BARBARA | Delete | NAME | | | Change | Addition |
| STREET ADDRESS | 6450 ARAGON WAY #306 | | STREET ADDRESS | | | | |
| CITY-ST-ZIP | FORT MYERS FL 33908 | | CITY-ST-ZIP | | | | |
| TITLE | SD | ☐ Delete | TITLE | | · · · · · · · · · · · · · · · · · · · | ☐ Change | Addition |
| NAME | BOSSCHER, GAYLE | | NAME | | | | |
| STREET ADDRESS | 5769 BEECHWOOD TRAIL | | STREET ADDRESS | | | | |
| CITY-ST-ZIP | FORT MYERS FL 33919 | | CITY-ST-ZIP | | | | |
| TITLE | TD CASE, TOM | ☐ Delete | TITLE | | | Change | ☐ Addition |
| NAME STREET ADDRESS | 18451 MCGREGOR BLVD #29 | | NAME STREET ADDRESS | | | | |
| CITY-ST-ZIP | FORT MYERS FL 33919 | | CITY-ST-ZIP | | | | |
| TITLE | - VIII INTERIO I E OUOTO | ☐ Delete | TITLE | | | ☐ Change | ☐ Addition |
| NAME . | | □ Delete | NAME | | | | ☐ Modition |
| STREET ADDRESS | | | STREET ADDRESS | | | | |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | | | , |
| TITLE | | ☐ Delete | TITLE | | | ☐ Change | Addition |
| NAME | | | NAME | | | . • | _ ` ' |
| STREET ADDRESS | } | | STREET AODRESS | | | | 1 |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | | | |
| 12. Thereby a | certify that the information supplied with | this filing does not qualify for | the evention sta | ted in Continu 110 07/01/1 | Table Oten and I findly a second | | |

2. Indicated on this report or 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:

4/15/03 (239) 482-7706