## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 15, 2002 8:00 am DOCUMENT # N00000004319 **Secretary of State** 1. Entity Name 02-15-2002 90017 007 \*\*\*\*61.25 MCINTOSH FAMILY FOUNDATION, INC. Principal Place of Business Mailing Address 986 DOUGLAS AVE. STE 100 986 DOUGLAS AVE. STE 100 ALTAMONTE SPRINGS FL 32714 ALTAMONTE SPRINGS FL 32714 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3655758 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) STARK, CHARLES H 986 DOUGLAS AVE, STE 100 ALTAMONTE SPRINGS FL 32714 Zip Code City 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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE Change Addition CR2E037 (9/01 MCINTOSH, DONALD E NAME NAME 300 SW GREEN TR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LEE'S SUMMIT MO 64082 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition MCINTOSH, NORENE NAME NAME 300 SW GREEN TR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LEE'S SUMMIT MO 64082 CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change MCINTOSH, BRUCE JOHN NAME NAME 248 NW PACIFIC GROVE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BEAVERTON OR 97006** CITY-ST-ZIP Change TITLE Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-7IP ☐ Change ☐ Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

2. 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.

CITY-ST-7IP

SIGNATURE:

MILE WALTER MEDITER MEDITER DIRECTOR OF SIGNING SIGNING

816537 7344

**FILED** 

CHARLES H. STARK, P. A. ATTORNEY AT LAW SUITE 100 986 DOUGLAS AVENUE TELEPHONE (407) 788-0250 E-MAIL CHSTARK@BELLSOUTH.NET ALTAMONTE SPRINGS, FLORIDA FACSIMILE (407) 788-7244 32714 January 28, 2002

Uniform Busines Report Division of Corporations PO. Box 1500 Tallahassee, FL 32302-1500

CHARLES H. STARK

McIntosh Family Foundation, Inc. (#59-3655758)

Document #N00000004319

Dear Sir or Madam:

Enclosed for filing on behalf of the above-referenced foundation is the fully executed 2002 Uniform Business Report. Also enclosed is check #6647 payable to your office in the amount of Sixty-One Dollars and 25/100 (\$61.25) representing the fee for this service.

Please contact the undersigned directly with any questions.

CHS/db **Enclosures**