2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000004722

TREIBER, TERRY W

HOLLY SPRINGS, FL 27540

5108 SALINAS CT

Name:

Address:

City-St-Zip:

Entity Name: THE TREIBER FAMILY FOUNDATION, INC.

FILED Apr 28, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 185 EDGEMERE WAY NAPLES, FL 34105 **Current Mailing Address: New Mailing Address:** 185 EDGEMERE WAY NAPLES, FL 34105 FEI Number: 04-3623557 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SKRIVAN, KENT A C/O BUTŹEL LONG 801 LAUREL OAK DR, STE. 705 NAPLES, FL 34108 ÚS 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete TREIBER, TERRY KUHN Name: Name: Address: 185 EDGENGER WAY S Address: City-St-Zip: NAPLES, FL 34105 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: TREIBER, BERTHOLD C Name: Address: 31115 PICKWICK LN Address: City-St-Zip: BEVERLY HILLS, MI 48205 City-St-Zip: Title: () Delete Title: () Change () Addition TREIBER, GRETCHEN E Name: Name: 1752 FRANKLIN ST Address: Address: City-St-Zip: **DENVER, CO 80218** City-St-Zip: Title: DT () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: TREIBER TERRY KUHN PD 04/28/2003