

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000005456

1. Entity Name

FIGHTING ELDER ABUSE TOGETHER, INC.

Principal Place of Business

591 JUPITER BLVD. NW
PALM BAY FL 32907

Mailing Address

591 JUPITER BLVD. NW
PALM BAY FL 32907

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3688154

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FRIDDLE, JUDITH A
591 JUPITER BLVD, NW
PALM BAY FL 32907

Name
JUDITH K. Ahler-Friddle

Street Address (P.O. Box Number is Not Acceptable)
591 Jupiter Blvd. N.W.

City
Palm Bay

FL

Zip Code
32907

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

Judith K. Ahler-Friddle
JUDITH K. Ahler-Friddle

(NOTE: Registered Agent signature required when reinstating)

4-24-01

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
JUDITH K. Ahler-Friddle (P)
591 Jupiter N.W.
Palm Bay, FL 32907

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRES. DEPT
JUDITH K. Ahler-Friddle (P)
591 Jupiter N.W.
Palm Bay, FL 32907

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
BARBARA HENGSTEBECK (D)
8094 BUCKLAKE RD.
TALLAHASSEE, FL 32311

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
NANCY BRYANT (D)
3001 SEQUOYA
PRESCOTT, AZ 86301

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DORIS FAHLER (D)
581 Jupiter N.W.
Palm Bay, FL 32907

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JUDITH K. AHLER-FRIDDLE (D)
591 Jupiter N.W.
Palm Bay, FL 32907

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Judith K. Ahler-Friddle
JUDITH K. Ahler-Friddle

4-24-01

321-984-8883

Date

Daytime Phone #

CRCE037 (10/00)