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

## DOCUMENT # N0100000390



	03 NOT-FOR-PR	A <sub>]</sub>	FILED Apr 07, 2003 8:00 am Secretary of State					
<ol> <li>Entity Nan</li> </ol>	RICAN FOUNDATION FOR H		ID V		o4-07-2003 9089 04-07-2003 9089	01 001 ****61	1.25	
Principal Place of Business 919 PRINCESS CT IAPLES FL 34110		Mailing Address 1919 PRINCESS CT NAPLES FL 34110		1 14 4 1 1 4 1 4 1 4 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 5	9-3693576	— ⊢	oplied For ot Applicable	
Zip	Country	Zip	Country	. <b>5.</b> Certificate of S	tatus Desired	\$8.75 Add Fee Require		
6. Name and Address of Current Registered Agent CLASP, INC. 3001 TAMIAMI TR N, 4TH FLOOR			Name Street Ac	7. Name and Address of New Registered Agent  Name  ANDREW S. EVVA  Street Address (P.O. Box Number is Not Acceptable)  1919 PRINCESS				
8. The above the obliga	e named entity submits this statement tions of registered agent.	for the purpose of changing its - ANDREW 5.	registered office or	APLES registered agent, or both, in			10-1018	
0,0,1,1,0,1,1			: Registered Agent signatui	tered Agent signature required when reinstating)  DATE  This is a signature required when reinstating in Financing \$5.00 May Be  Make Check Payable to				
10. TITLE VAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D  DP EVVA, ANDREW S 1919 PRINCESS CT NAPLES FL 34110	PIRECTORS  Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANG	IES TO OFFICERS AND	DIRECTORS IN Change	10 Addition	
TITLE Name Street address City-St <u>-Zip</u>	DS EVVA, PHYLLIS S 1919 PRINCESS CT NAPLES FL 34110	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV CAMPBELL, DONALD W 6849 GRENADIER BLVD NAPLES FL 34108	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			↑ ☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EVVA, MICHELLE 4315 AZALEZ APT 116 LISLE IL 60532	☐ Delete	TITLE  NAME STREET ADDRESS CITY-ST-ZIP			· Change	Addition	
ITLE IAME TREET ADDRESS ITY-ST-ZIP	DT PETERSON, JOHN V 13024 POND APPLR DR NAPLES FL 34119	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
ITLE AME	DAT		TITLE				□ A ####	
TREET ADDRESS	SOMOGYI, GABOR H-1122 BUDAPEST VAROSMAJO HUNGARY	□ Delete DR U.7	TITLE NAME STREET ADDRESS CITY-SI-ZIP			☐ Change	Addition .	

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:** 

#RANDREW 5. EVVA 4-4-2003 139-593-9513