4/7/

FILED
May 21, 2002 8:00 am
Secretary of State
04-07-2002 90567 014 ****70.00

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

DOCUMENT # N01000004383

1. Entity Name
APALACHICOLA BAND of CREEK INDIANS, INC.

DO NOT WRITE IN THIS SPACE

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
104 W. 4th AVENUE
Suite, Apt. #, etc.
TALLAHASSEE, FL
Zip 32303 Country USA

3. Mailing Address
SAME AS (2.)
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number
59-3733787
Applied For
Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name Dr. MARY-BLOUNT Ph.D, LCSW
Street Address (P.O. Box Number is Not Acceptable)
104 W. 4th AVENUE
City TALLAHASSEE FL Zip Code 32303

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 date if applicable. (NOTE: Registered Agent signature required when reinstating).

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

2003

10. OFFICERS AND DIRECTORS		
TITLE ADMIN. OFFICER NAME Dr. MARY Blount, Ph.D., LCSW STREET ADDRESS 104 W. 4th Ave. CITY-ST-ZIP TALLAHASSEE, FL 32303 D		
TITLE CHIEF / CHAIRWOMAN NAME ANN McCLELLAN STREET ADDRESS 16469 SE MAIN ST. CITY-ST-ZIP BLOUNTSTOWN, FL 32424 D		
TITLE SEC/TREASURER NAME VANCE BATEMAN STREET ADDRESS Rt 2 Box 277B CITY-ST-ZIP ALTHA, FL 32421 D		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

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

SIGNATURE: Mary Blount, Ph.D., LCSW
MARY BLOUNT, Ph.D. LCSW
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-3-02 (850) 222-4583
Date Daytime Phone #

Attachment #
[redacted] 28233
#N01000004388 4/23/02

Titles of Apalachicola Band Officers

Tribal administrator
1. Dr. Mary Blount, Director D
104 W. 4th avenue
Tallahassee, FL 32303

2. Chief Ann McClellan, Director D
16469 SE Main St.
Blountstown, FL 32424

3. Secy/Treasurer Vance Bateman, Director D
Rt 2 Box 277B
Altha, FL 32421

The Official address of this
Tribe is
104 W. 4th avenue
Tallahassee, FL 32303