

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

FILED
Feb 14, 2003 8:00 am
Secretary of State

02-14-2003 90202 001 ****61.25

DOCUMENT # N01000008283

1. Entity Name
FELTEL FAMILY FOUNDATION, INC.



Principal Place of Business
**9274 RIVER SHORES LANE
JACKSONVILLE BEACH FL 32257**

Mailing Address
**9274 RIVER SHORES LANE
JACKSONVILLE BEACH FL 32257**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
JACKSONVILLE, FL

City & State

Zip
32257

Country

Zip

Country

4. FEI Number **59-3757056**

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

**FELTEL, GILBERT L JR.
1315 MORVENWOOD ROAD
JACKSONVILLE FL 32207**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **FELTEL, MARY W**
STREET ADDRESS **9274 RIVER SHORES LANE**
CITY-ST-ZIP **JACKSONVILLE BEACH FL 32257**

TITLE **P/T/D** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP **JACKSONVILLE, FL. 32257**

TITLE **D** ☐ Delete
NAME **WILLIAMS, DEBORAH F**
STREET ADDRESS **808 POINT LA VISTA ROAD NORTH**
CITY-ST-ZIP **JACKSONVILLE FL 32207**

TITLE **D/V** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **CARLSON, KIMBERLY M**
STREET ADDRESS **227 23RD STREET**
CITY-ST-ZIP **DEL MAR CA 92014**

TITLE **D/V** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **VOSS, JENNIFER F**
STREET ADDRESS **405 GLENMONT DRIVE**
CITY-ST-ZIP **SOLANA BEACH CA 92075**

TITLE **D/V** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DS** ☐ Delete
NAME **FELTEL, GILBERT L JR**
STREET ADDRESS **1318 MORVENWOOD ROAD**
CITY-ST-ZIP **JACKSONVILLE FL 32207**

TITLE **D/V/S** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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: **MARY W. FELTEL**

FEB. 8, 2003

904.739.0303

CR2E037 (10/02)