

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

APPROVED  
AND  
FILED

0075592

DOCUMENT # N02000004449

1. Entity Name

ENVIRONMENTAL FACILITIES ADMINISTRATION AND MANAGEMENT FOUNDATION INC.



03 APR -2 AM 3:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

12 NORTH ELM STREET  
FELLSMERE FL 32948

12 NORTH ELM STREET  
FELLSMERE FL 32948

2. Principal Place of Business

10 N. Cypress St

3. Mailing Address

P.O. Box 279

Suite, Apt. #, etc.

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

Fellsmere FL

City & State

Fellsmere FL

4. FEI Number

30-0102955

Applied For

Not Applicable

Zip 32948

Country USA

Zip 32948

Country USA

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RING, STEVE  
12 NORTH ELM STREET  
FELLSMERE FL 32948

7. Name and Address of New Registered Agent

Name Ring, Steve

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

10 N. Cypress St

City Fellsmere

FL

Zip Code 32948

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

Steve Ring, Treasurer

3/28/03

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

TITLE PCD  
NAME ADAMS, TOM  
STREET ADDRESS 15550 C.R. 507  
CITY-ST-ZIP FELLSMERE FL 32948 ☐ Delete

TITLE SD  
NAME JACKSON, TODD T  
STREET ADDRESS 1290 BONAVENTURE DRIVE  
CITY-ST-ZIP MELBOURNE FL 32940 ☐ Delete

TITLE TD  
NAME RING, STEVE  
STREET ADDRESS 12 NORTH ELM STREET  
CITY-ST-ZIP FELLSMERE FL 32948 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME Adams, Tom  
STREET ADDRESS 10 N. Cypress St  
CITY-ST-ZIP Fellsmere, FL 32948 ☒ Change ☐ Addition

TITLE SD  
NAME Jackson, Todd T.  
STREET ADDRESS 10 N. Cypress St  
CITY-ST-ZIP Fellsmere, FL 32948 ☒ Change ☐ Addition

TITLE TD  
NAME Ring, Steve  
STREET ADDRESS 10 N. Cypress St  
CITY-ST-ZIP Fellsmere, FL 32948 ☒ Change ☐ Addition

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

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

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 *Steve Ring* *Tom Adams* 3-28-03-97X-571-057

CR2E037 (10/02)