

Amended

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

FILED

03 DEC 19 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02000006349 1. Entity Name ALLIANCE FOR FLORIDA'S FUTURE, INC.	
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Principal Place of Business 2040 DELTA WAY TALLAHASSEE, FL 32303	Mailing Address 2040 DELTA WAY TALLAHASSEE, FL 32303
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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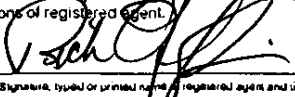
City & State Zip Country	City & State Zip Country
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☒ CHECK HERE IF MAKING CHANGES

5. Name and Address of Current Registered Agent OPPENHEIM, RICK 2040 DELTA WAY TALLAHASSEE, FL 32303	
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4. FEI Number 22-3865096	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

8. The above named entity submits the 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  RICK OPPENHEIM, TREASURER/DIRECTOR 12/19/03 Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent's signature required when requesting) DATE	
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FILE NOW: FEE IS \$61.25 Initial or Amended UBR	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD OPPENHEIM, RICK 2040 DELTA WAY TALLAHASSEE, FL 32303 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 600025867946 12/31/03--01011--015
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHANKS, MELINE 4171 RED OAK DRIVE TALLAHASSEE, FL 32311 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D JANE HOLMES-CAIN 829 E. CALL ST TALLAHASSEE, FL 32301 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ASHLINE, SARA 14120 82ND TERR N SEMINOLE, FL 33776 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	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:  RICK OPPENHEIM 12/19/03 (850)386-9100 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #	
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