

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2005 8:00 am
Secretary of State

07-21-2005 90031 043 ****70.00

DOCUMENT # N03000000129

1. Entity Name
THE REESE FAMILY FOUNDATION, INC.



Principal Place of Business
101 E. KENNEDY BOULEVARD, SUITE 2700
TAMPA, FL 33602

Mailing Address
101 E. KENNEDY BOULEVARD, SUITE 2700
TAMPA, FL 33602

50056751



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

06142005

Chg-NP

CR2E037 (10/03)

4. FEI Number
06-1689083

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

TAYLOR, J. ERIC ESQ.
101 E. KENNEDY BOULEVARD, SUITE 2700
TAMPA, FL 33602

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 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

**Filing Fee is \$61.25
Due by September 7, 2005**

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	DP	<input type="checkbox"/> Delete
NAME	REESE, JAMES H	
STREET ADDRESS	2869 WEATHERSFIELD COURT	
CITY-ST-ZIP	CLEARWATER, FL 33761	
TITLE	DTS	<input type="checkbox"/> Delete
NAME	REESE, CAROL M	
STREET ADDRESS	2869 WEATHERSFIELD COURT	
CITY-ST-ZIP	CLEARWATER, FL 33761	
TITLE	D	<input type="checkbox"/> Delete
NAME	REESE, SHANNON C	
STREET ADDRESS	13600 EGRET BLVD. #K402	
CITY-ST-ZIP	CLEARWATER, FL 33762	
TITLE	D	<input type="checkbox"/> Delete
NAME	REESE, DANIEL P	
STREET ADDRESS	2800 FEATHERSOUND DRIVE, #824	
CITY-ST-ZIP	CLEARWATER, FL 33762	
TITLE	D	<input type="checkbox"/> Delete
NAME	REESE, KRISTIN A (married)	
STREET ADDRESS	2869 WEATHERSFIELD COURT	
CITY-ST-ZIP	CLEARWATER, FL 33761	
TITLE	D	<input type="checkbox"/> Delete
NAME	REESE, TODD J	
STREET ADDRESS	13600 EGRET BLVD. #K102	
CITY-ST-ZIP	CLEARWATER, FL 33762	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sean E. Coleman	
STREET ADDRESS	202 Shore Drive West	
CITY-ST-ZIP	Oldsmar, FL 34677	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Reese, Shannon C.	
STREET ADDRESS	532 38th Ave. N.E.	
CITY-ST-ZIP	St. Petersburg, FL 33704	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Reese, Daniel P	
STREET ADDRESS	2572 Brandywine Drive	
CITY-ST-ZIP	Clearwater, FL 33761	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Coleman, Kristin R.	
STREET ADDRESS	202 Shore Drive West	
CITY-ST-ZIP	Oldsmar, FL 34677	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Reese, Todd J.	
STREET ADDRESS	532 38th Ave. N.E.	
CITY-ST-ZIP	St. Petersburg, FL 33704	

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:

Carol M. Reese / Carol M. Reese
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/19/05
Date

(727) 799-0927
Daytime Phone #