

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

May 06, 2002 8:00 am
Secretary of State

05-06-2002 90092 035 ****61.25

DOCUMENT # N03947

1. Entity Name

EARTH FOUNDATION INC.

Principal Place of Business

Mailing Address

**1715 STICKNEY POINT RD
A1
SARASOTA FL 34231
US**

**3412 CLARK RD
PBM 113
SARASOTA FL 34231
US**

2. Principal Place of Business

3. Mailing Address

3412 Clark Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

-113

City & State

City & State

Sarasota, FL

Zip

Country

Zip

Country

34231

Sarasota

4. FEI Number

59-2972760

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

**SAMS, LAURIE B
2815 PROCTOR RD
SARASOTA FL 34231**

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.

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
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME **WADE, MICHAEL D. (EX. D)**
STREET ADDRESS **3412 CLARK RD. #113**
CITY-ST-ZIP **SARASOTA FL 34231**

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

TITLE ☐ Delete
NAME **D WAY, TIMOTHY S.**
STREET ADDRESS **1007 RIVER DR**
CITY-ST-ZIP **RUSKIN FL 33570**

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

TITLE ☐ Delete
NAME **WADE, EDWARD J.**
STREET ADDRESS **4110 GRAY STREET W**
CITY-ST-ZIP **TAMPA FL**

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

TITLE ☐ Delete
NAME **BENANNO, SHARON**
STREET ADDRESS **5368 COLONY MEADOWS LN**
CITY-ST-ZIP **SARASOTA FL 34233**

TITLE ☒ Change ☐ Addition
NAME **Bonanno Sharon**
STREET ADDRESS **3412 Clark Rd #159**
CITY-ST-ZIP **Sarasota, FL 34231**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ 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

Sharon Bonanno

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/15/02

941 922-5032

CR2E037 (9/01)