

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N16404

1. Entity Name

THE CLAUDE PEPPER FOUNDATION, INC.

FILED

May 28, 2002 8:00 am
Secretary of State

05-28-2002 90714 046 ****61.25

Principal Place of Business

636 WEST CALL ST.
TALLAHASSEE FL 32306-1122
US

Mailing Address

636 WEST CALL ST.
TALLAHASSEE FL 32306-1122
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2711448

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

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 NAME STREET ADDRESS CITY-ST-ZIP	D D'ALEMBERTE, TALBOT FSU, 211 WESCOTT BUILDING TALL FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SLIGER, BERNARD F DR. 3341 E. LAKE SHORE DR. TALLAHASSEE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SPULAK, THOMAS J 2300 N STREET, NW WASHINGTON DC	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUDAK, IRENE 10821 WESTBROOK DR ORLANDO FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CLEMENTS, ALLEN J 1004 ALOHA WAY LADY LAKE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PEPPER, FRANK 1020 MERRITT DR TALLAHASSEE FL	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	C/D Thomas J. Spulak Shaw Pittman, 2300 N Street, N.W. Washington, DC 20037	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP/D Irene Hudak 1501 Lake Villa Drive Tavares, FL 32778	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D Allen Clements, Jr. 2205 7th Avenue Drive, East Bradenton, FL 34208	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Frances H. Campbell Claude Pepper Center, 636 West Call Street Tallahassee, FL 32306-1122	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Tina Pepper 1020 Merritt Drive Tallahassee, FL 32301	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PLEASE SEE ATTACHED LIST	

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:

Signature of Frances H. Campbell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OFFICER OR DIRECTOR

Date

Daytime Phone #

5-8-02

CR2E037 (9/01)

Attachment # N16404/866753

D / JAMES A. BRENNAN, SR. (ADD)

3115 Granada Blvd.
Coral Gables, FL 33134

D / TALBOT D'ALEMBERTE (CHANGE)

FSU, 211 Westcott Building
Tallahassee, FL 32306-1470

D / STEVE DAVIS (ADD)

Davis Prof. Partners, Post Office Box 520
Winter Park, FL 32790

D / JACK D. GORDON (ADD)

Hospice Foundation, 777 17th Street, Suite 401
Miami Beach, FL 33139

D / GRACE CAVERT NELSON (ADD)

Senator Bill Nelson, 716 Hart Office Bldg.
Washington, DC 20510

T / D / BERNARD F. SLIGER (CHANGE)

FSU Stavros Center, 250 S. Woodward Ave.
Tallahassee, FL 32306-4220