2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State
04-29-2002 90066 022 ****61.25

DOCUMENT # N25871

1. Entity Name

THE SCHOENBAUM FAMILY FOUNDATION, INC.

Principal Place of Business	Mailing Address
340 S. PALM AVE #162 SARASOTA FL 34236 US	340 S. PALM AVE #162 SARASOTA FL 34236 US

DO NOT WRITE IN THIS SPACE

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 65-0043921 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

~~DIERCKS, JEFFREY~~
~~C/O INTRUST ADVISORS~~
~~320 WEST KENNEDY BOULEVARD, SUITE 250~~
~~TAMPA FL 33606-1455~~

7. Name and Address of New Registered Agent

Name BETTY SCHOENBAUM
Street Address (P.O. Box Number is Not Acceptable) 340 S. PALM AVE, #162
City SARASOTA **FL** Zip Code 34236

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 Betty Schoenbaum April 15, 2002
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 SCHOEBAUM, BETTY FRANK 340 S. PALM AVE #162 SARASOTA FL 34236	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHOENBAUM, RAYMOND D. 5530 CLAIRE ROSE LN ATLANTA GA 30327	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHOENBAUM, JEFFRY F. 2966 EAGLE ESTATES CIRCLE WEST CLEARWATER FL 34621	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLER, JOANN SCHOENBAUM 1331 PRESERVATION WAY OLDSMAR FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	34677	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHOENBAUM, EMILY 340 S. PALM AVE #162 SARASOTA FL 34236	☐ 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

CR2E037 (9/01)

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 REQUIRED~~ Betty Schoenbaum 4/15/2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #