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

DOCUMENT # N30851

1. Entity Name

HY-TEK FOUNDATION FOR THE DISABLED, INC.



FILED Mar 07, 2003 8:00 am Secretary of State

03-07-2003 90090 038 ****61.25

I III-ICK I	CONDATION FOR THE DISA	IDLED, INC.							
Principal Place of Business C/O WILLIAM R. BATEMAN 121 BROWNING CIRCLE SE WINTER HAVEN FL 33884		Mailing Address C/O WILLIAM R. BATEMAN 121 BROWNING CIRCLE SE WINTER HAVEN FL 33884		hytek4@juno.com					
2. Principal	Place of Business	3. Mailing Addre	SS						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES					
City & State		City & State		1	30 3 133003		pplied For		
Zip	Country	* ⁻ -Zip	Co	puntry	5. Certificate of Sta	tus Desired	1 \$8.75 Ad Fee Require	lditional	
	6. Name and Address of Current	Registered Agent	-	<u> </u>	7. Name and Addre	ess of New Registered	d Agent		
				Name	•				
BATEMAN, WILLIAM R. 121 BROWNING CIRCLE SE				Street Address (P.O. Box Number is Not Acceptable)					
WINTER	HAVEN FL 33884								
2)				City	746.45	<u> </u>	_ ' - ' -		
8. The above the obligation	e named entity submits this statement for tions of registered agent.	or the purpose of chai	nging its registe	red office or register	red agent, or both, in th	ne State of Florida. I an	n familiar with,	and accept	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable	* (NOTE: Paginter	ed Agent signature required	d when relateting	DATE			
···		and an appropriate.	- Tracic rogister	oo Again a ghallara raddhad	when remistating)				
ರ್ಷ ವರ್ಷವಾಗಿ ಶಿನಾಸ್ತ	FILE NOW: FEE IS \$61.25		ction Campaign at Fund Contribu		. \$5.00 May Be Added to Fees	Make Che Florida Depa	ck Payable rtment of		
10.	OFFICERS AND DIE	BECTORS	11.		ADDITIONS/CHANGES	S TO OFFICERS AND F	NDCOTORS IN	140	
TITLE	PD	□ Del	_		ABBITTONO/OFIANGLE	3 TO CHARLES AND L	Change	Addition	
NAME	BATEMAN, WILLIAM R.		NAM	Į.			Silidings	Addition	
STREET ADDRESS	121 BROWNING CIRCLE SE		STR	EET ADDRESS					
CITY-ST-ZIP	WINTER HAVEN FL		CIT	Y-ST-ZIP	,				
TITLE	TD	☐ Del	ete TITL	.E			☐ Change	☐ Addition	
NAME	BATEMAN, DEAN K.		NAN	AE					
STREET ADDRESS CITY-ST-ZIP	121 BROWNING CIRCLE SE			EET ADDRESS					
	WINTER HAVEN FL SD			Y-ST-ZIP					
TITLE NAME	BATEMAN, SUZANNE E.	~ Deli	ete - TITL			-	☐ Change	☐ Addition	
STREET ADDRESS	121 BROWNING CIRCLE SE			EET ADDRESS					
CITY-ST-ZIP	WINTER HAVEN FL			(-ST-ZIP					
TITLE	D	Dele	ete TITL	E			☐ Change	Addition	
NAME	TAYLOR, VINCENT D	74 500	NAM				change	C Addition	
STREET ADDRESS	5225 TIMBERLANE ROAD		STR	EET ADDRESS					
CITY-ST-ZIP	LAKE WALES FL 33898		CITY	'-ST-ZIP					
TITLE	D	☐ Dele	ete TITL	E		,	☐ Change	☐ Addition	
NAME	DUNCAN, LORRAINE	☐ Dele) NAM	1E			☐ Change	☐ Addition	
NAME STREET ADDRESS	DUNCAN, LORRAINE 113 LAKE FLORENCE DRIVE NO	☐ Dele	NAM Stri	IE EET ADDRESS			☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	DUNCAN, LORRAINE 113 LAKE FLORENCE DRIVE NO WINTER: HAVEN: FL		NAM STRE	EET ADDRESS					
NAME STREET ADDRESS CITY-ST-ZIP	DUNCAN, LORRAINE 113 LAKE FLORENCE DRIVE NO WINTER: HAVEN: FL D	□ Dele	NAM STRI CITY	EET ADDRESS			☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DUNCAN, LORRAINE 113 LAKE FLORENCE DRIVE NO WINTER: HAVEN: FL D MCCOLLOUGH, ANDRA LOU		NAM STRI CETTY Ple TITL	IE EET ADORESS 					
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DUNCAN, LORRAINE 113 LAKE FLORENCE DRIVE NO WINTER: HAVEN: FL D		NAM STRI CITY Ple TITL NAM STRE	EET ADDRESS					

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:

William R. Buternan Floesident

3/11/03 863-324-1117