

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N31837

1. Entity Name

RISK COMMUNICATION & ENVIRONMENTAL INSTITUTE, IN

Principal Place of Business

5822 N.W. 91 BLVD.
GAINESVILLE FL 32653
US

Mailing Address

5822 N.W. 91 BLVD.
GAINESVILLE FL 32606

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

59-2951554

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PALING, JOHN
5822 NW 91 BLVD.
GAINESVILLE FL 32606

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

TITLE PD
NAME PALING, JOHN ☐ Delete
STREET ADDRESS 5822 NW 91ST BLVD.
CITY-ST-ZIP GAINESVILLE FL

TITLE T
NAME SMALL, PARKER P ☐ Delete
STREET ADDRESS 3454 NW 12 AVE
CITY-ST-ZIP GAINESVILLE FL

TITLE T ☒ Delete
NAME ROSENBAUM, WALTER D
STREET ADDRESS 1521 NW 68 TERRACE
CITY-ST-ZIP GAINESVILLE FL

TITLE D ☐ Delete
NAME MCKAY, JAMES
STREET ADDRESS 1106 NE 12 AVE
CITY-ST-ZIP GAINESVILLE FL

TITLE S ☐ Delete
NAME BORGERT, CHRISTOPHER
STREET ADDRESS 238 TURKEY CREEK
CITY-ST-ZIP ALACHUA FL

TITLE T ☐ Delete
NAME MLAKAR, CHARLES
STREET ADDRESS MILL RIVER FARM
CITY-ST-ZIP GATES MILLS OH

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☒ Change ☐ Addition
NAME BOTT-PALING, WENDY
STREET ADDRESS 5822 NW 91 BLVD
CITY-ST-ZIP GAINESVILLE, FL 32653

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

TITLE ☐ Change ☐ Addition
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 file empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90090 020 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)

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