

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N40395

1. Entity Name

FLORIDA NARCOLEPSY ASSOCIATION, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90309 014 ****61.25

Principal Place of Business

Mailing Address

5104- 43RD AVE W.
BRADENTON FL 34209
US

5104- 43RD AVE W.
BRADENTON FL 34209-6722
US

2. Principal Place of Business

3. Mailing Address

2631 59th St.

P.O. Box 15352

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State Sarasota, FL

City & State Sarasota, FL

4. FEI Number 59-3033120

Applied For

Not Applicable

Zip 34243

Country USA

Zip 34243

Country USA

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

GRETSMAN, NORMA L
5104- 43RD AVE W.
BRADENTON FL 34209

Name Cikovic, Marion L.

Street Address (P.O. Box Number is Not Acceptable)
2631 59th St.

City Sarasota FL Zip Code 34243

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 Marion L. Cikovic Vice President 4/17/00
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 TD ☐ Delete
NAME GOETTSMAN, NORMA L
STREET ADDRESS 5104- 43RD AVE W.
CITY-ST-ZIP BRADENTON FL 34209

TITLE D ☒ Change ☐ Addition
NAME Goettman, Norma L.
STREET ADDRESS 5104 43rd Ave W.
CITY-ST-ZIP Bradenton, FL 34209

TITLE D ☐ Delete
NAME BETTS, MARY
STREET ADDRESS 10457 COOPERWOOD DR.
CITY-ST-ZIP NEW PORT RICHEY FL 34654

TITLE DVST ☐ Change ☒ Addition
NAME CIKOVIC, MARION L
STREET ADDRESS 2631 59TH ST
CITY-ST-ZIP SARASOTA, FL 34243-2439

TITLE D ☐ Delete
NAME FAY, ROBERT
STREET ADDRESS 16211 2ND ST. E.
CITY-ST-ZIP REDINGTON BEACH FL

TITLE PP ☐ Change ☒ Addition
NAME Horn, Paul
STREET ADDRESS 5611 Bayshore Rd.; Lot 16
CITY-ST-ZIP Palmetto, FL 34221

TITLE D ☐ Delete
NAME GOETTMANN, ROBERT
STREET ADDRESS 5104 43RD AVE. W.
CITY-ST-ZIP BRADENTON FL

TITLE D ☐ Change ☒ Addition
NAME CIKOVIC, FRANK C.
STREET ADDRESS 2631 59th St.
CITY-ST-ZIP Sarasota, FL 34243-2439

TITLE D ☐ Delete
NAME RHODES, RON
STREET ADDRESS 3773 WAKE AVE.
CITY-ST-ZIP SARASOTA FL

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

TITLE D ☒ Delete
NAME UNDERWOOD, GLENN
STREET ADDRESS 12240- 69TH TERR N
CITY-ST-ZIP SEMINOLE FL 34642

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: SIGN Marion L. Cikovic
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/00 941-355-5359
Date Daytime Phone #

CR2E037 (9/99)