

2000 UNIFORM BUSINESS REPORT (UBR)

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

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

DOCUMENT # N40395

1. Entity Name

FLORIDA NARCOLEPSY ASSOCIATION, INC.

Principal Place of Business

5104- 43RD AVE W.
 BRADENTON FL 34209
 US

Mailing Address

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

2. Principal Place of Business

3. Mailing Address

2631 59th St.
 Suite, Apt. #, etc.

P.O. Box 15352
 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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name Cirkovic, 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. Cirkovic Vice President
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

4/17/00
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	TD	<input type="checkbox"/> Delete
NAME	GOETTMAN, NORMA L	
STREET ADDRESS	5104- 43RD AVE W.	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	D	<input type="checkbox"/> Delete
NAME	BETTS, MARY	
STREET ADDRESS	10457- COOPERWOOD DR.	
CITY-ST-ZIP	NEW PORT RICHEY FL 34654	
TITLE	D	<input type="checkbox"/> Delete
NAME	FAY, ROBERT	
STREET ADDRESS	16211 2ND ST. E.	
CITY-ST-ZIP	REDINGTON BEACH FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	GOETTMANN, ROBERT	
STREET ADDRESS	5104 43RD AVE. W.	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	RHODES, RON	
STREET ADDRESS	3773 WAKE AVE.	
CITY-ST-ZIP	SARASOTA FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	UNDERWOOD, GLENN	
STREET ADDRESS	12240- 69TH TERR N	
CITY-ST-ZIP	SEMINOLE FL 34642	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Goettman, Norma L.	
STREET ADDRESS	5104 43rd Ave W.	
CITY-ST-ZIP	Bradenton, FL 34209	
TITLE	DVST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CIRKOVIC, MARION L	
STREET ADDRESS	2631 59TH ST	
CITY-ST-ZIP	SARASOTA, FL 34243-2439	
TITLE	PP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Horn, Paul	
STREET ADDRESS	5611 Bayshore Rd; Lot 16	
CITY-ST-ZIP	Palmetto, FL 34221	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CIRKOVIC, FRANK C.	
STREET ADDRESS	2631 59th St.	
CITY-ST-ZIP	Sarasota, FL 34243-2439	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Marion L. Cirkovic
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/17/00

Daytime Phone #

941-355-5359

CR2E037 (9/99)