

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N40634

1. Entity Name

GOOD NEWS FOUNDATION, INC.

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90298 047 ****61.25

Principal Place of Business

10575 OLD DIXIE HIGHWAY
ST AUGUSTINE FL 32095
US

Mailing Address

10575 OLD DIXIE HIGHWAY
ST AUGUSTINE FL 33801-5252
US

2. Principal Place of Business

500 S FLORIDA AVE

3. Mailing Address

Suite, Apt., etc. Same

4th FLOOR

City & State

LAKE LAND FL

City & State

as

4. FEI Number

59-3036082

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HART, J. BRIGHAM
10575 OLD DIXIE HWY.
PONTE VEDRA FL 32082

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 ☐ Delete

NAME D
HART, JOHN BRIGHAM
STREET ADDRESS 10575 OLD DIXIE HIGHWAY
CITY-ST-ZIP ST AUGUSTINE FL

TITLE ☐ Delete

NAME D
HART, LITA G
STREET ADDRESS 10575 OLD DIXIE HIGHWAY
CITY-ST-ZIP ST AUGUSTINE FL

TITLE ☐ Delete

NAME D
WELLS, MARK R
STREET ADDRESS 10575 OLD DIXIE HWY
CITY-ST-ZIP ST AUGUSTINE FL

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition

NAME 500 S. Florida Avenue, Suite 240
STREET ADDRESS Lakeland, FL 33801
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition

NAME 500 S. Florida Avenue, Suite 240
STREET ADDRESS Lakeland, FL 33801
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition

NAME 500 S. Florida Avenue, Suite 240
STREET ADDRESS Lakeland, FL 33801
CITY-ST-ZIP

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 like empowered.

SIGNATURE:

Mark R. Wells

Date

Daytime Phone #

4/29/00 863-284-1181