2000 UNIFORM BUSINESS REPORT (UBR)

3/2

FILED
May 12, 2000 8:00 am
Secretary of State
03-27-2000 90100 035 ****61.25

DOCUMENT # N42053

1. Entity Name

PASCO PUBLIC SCHOOLS FOUNDATION, INC.

Principal Place of Business	Mailing Address
P.O. BOX 1248 LAND O LAKES FL 34639 US	P.O. BOX 1248 LAND O LAKES FL 34639-1248 US

DO NOT WRITE IN THIS SPACE

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 59-3048717 ☐ Applied For ☐ Not Applicable

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
MCCLAIN, JOE A. 402 E CHURCH AVE DADE CITY FL 33525	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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD DEWITT, JOHN 6335 US HWY. 19 NEW PORT RICHEY FL 34652	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Treasurer (T) DeWitt, John P.O. Box 156 Brooksville, FL 34605-0156	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SMALL, KATHLEEN L 21827 STATE RD. 54 LUTZ FL 33549	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Secretary (S) Curtiss, Rosemary 1825 Collier Parkway Lutz, FL 33549	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD CASTRIORA, TOM 12930 US HWY. 19 HUDSON FL 34667	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	President (P) Castriota, Tom 12930 US Hwy 19 Hudson, FL 34667	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Vice President (V) Norberg, Bob P.O. Box 97 Dade City, UT 33525	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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: Tom Castriota REQUIRED Feb. 16, 2000 · 813/794-2705
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #