

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 91887 031 \*\*\*\*61.25

**DOCUMENT # N43460**

1. Entity Name

**GUARDIAN AD LITEM GUILD OF MONROE COUNTY INCORPORATED**



Principal Place of Business

818 S. JADE DRIVE  
KEY LARGO FL 33037  
US

Mailing Address

818 S. JADE DRIVE  
KEY LARGO FL 33037  
US

2. Principal Place of Business

1160 Indian Mound Trail  
Suite, Apt. #, etc.

3. Mailing Address

1160 Indian Mound Trail  
Suite, Apt. #, etc.

City & State

Tavernier FL

City & State

Tavernier FL

4. FEI Number 65-0305892

Applied For

Not Applicable

Zip

33070

Country

Monroe

Zip

33070

Country

Monroe

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

WHITFIELD, SANDRA B  
818 S. JADE DRIVE  
KEY LARGO FL 33037

7. Name and Address of New Registered Agent

Name

Rita Rushing

Street Address (P.O. Box Number is Not Acceptable)

1160 Indian Mound Trail

City

Tavernier

FL

Zip Code

33070

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Rita Rushing*

Rita Rushing

4-28-03

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **TD** ☒ Delete  
NAME **WHITFIELD, SANDRA**  
STREET ADDRESS **818 S. JADE DRIVE**  
CITY-ST-ZIP **KEY LARGO FL 33037**

TITLE **PSD** ☐ Delete  
NAME **LANG, CLAIRE**  
STREET ADDRESS **BOX 1176**  
CITY-ST-ZIP **ISLAMORADA FL 33036**

TITLE **VD** ☐ Delete  
NAME **MORET, SUE**  
STREET ADDRESS **PO BOX 1757**  
CITY-ST-ZIP **ISLAMORADA FL 33036**

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 **RUSHING, RITA**  
STREET ADDRESS **1160 INDIAN MOUND TRAIL**  
CITY-ST-ZIP **TAVERNIER FL 33070**

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

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

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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:

*Rita Rushing*

Rita Rushing 4-28-03 305664343

CR2E037 (10/02)