

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2000 8:00 am
Secretary of State

01-21-2000 90120 050 ****70.00

DOCUMENT # N44917

1. Entity Name

NEIGHBORHOOD ENTERPRISE FOUNDATION, INC.

Principal Place of Business

Mailing Address

3420 BARRANCAS AVE.
 PENSACOLA FL 32507
 US

P. O. BOX 8178
 PENSACOLA FL 32505
 US

2. Principal Place of Business

3. Mailing Address

P.O. Box 18178

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
 Pensacola FL

4. FEI Number

59-3093034

Applied For

Not Applicable

Zip

Country

Zip

Country

32523-8178

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

BRYAN, EDWARD
 127 BRANDON AVE.
 PENSACOLA FL 32507

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 ☐ Delete
 NAME D LISTER, OPAL
 STREET ADDRESS 11593 DUELING OAKS DRIVE
 CITY-ST-ZIP PENSACOLA FL

TITLE ☒ Change ☐ Addition
 NAME Director
 STREET ADDRESS Lister, Opal
 CITY-ST-ZIP 9701 Chemstrand Road
 Pensacola, FL 32514

TITLE ☐ Delete
 NAME DS BRYAN, EDWARD
 STREET ADDRESS 127 BRANDON AVE.
 CITY-ST-ZIP PENSACOLA FL

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

TITLE ☐ Delete
 NAME DT JULIAN, JOHN
 STREET ADDRESS 8385 LOFTON DR
 CITY-ST-ZIP PENSACOLA FL 32514

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

TITLE ☐ Delete
 NAME D HOWELL, DORIS A.
 STREET ADDRESS 4000 POWRIE DR.
 CITY-ST-ZIP PENSACOLA FL

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

TITLE ☐ Delete
 NAME DP SCHWAB, JUANITA
 STREET ADDRESS 315 ADA WILSON AVE
 CITY-ST-ZIP PENSACOLA FL

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

TITLE ☐ Delete
 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:

Edward Bryan
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edward Bryan, Secretary 1/18/00 (850) 458-0466

Date

Daytime Phone #

CR2E037 (9/99)