

DOCUMENT # N44917

1. Entity Name

NEIGHBORHOOD ENTERPRISE FOUNDATION, INC.

Principal Place of Business

3420 BARRANCAS AVE.
PENSACOLA FL 32507
US

Mailing Address

PO BOX 18178
PENSACOLA FL 32523-8178
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

P.O. Box 18178

Suite, Apt. #, etc.

City & State

Pensacola, FL

Zip

32523-8178

Country

US

4. FEI Number

59-3093034

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRYAN, EDWARD
127 BRANDON AVE.
PENSACOLA FL 32507

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	D	<input type="checkbox"/> Delete
NAME	LISTER, OPAL	
STREET ADDRESS	9701 CHEMSTRAND RD	
CITY-ST-ZIP	PENSACOLA FL 32514	
TITLE	DS	<input type="checkbox"/> Delete
NAME	BRYAN, EDWARD	
STREET ADDRESS	127 BRANDON AVE.	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	DT	<input type="checkbox"/> Delete
NAME	JULIAN, JOHN	
STREET ADDRESS	8385 LOFTON DR	
CITY-ST-ZIP	PENSACOLA FL 32514	
TITLE	D	<input type="checkbox"/> Delete
NAME	HOWELL, DORIS A.	
STREET ADDRESS	4000 POWRIE DR.	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	DP	<input type="checkbox"/> Delete
NAME	SCHWAB, JUANITA	
STREET ADDRESS	315 ADA WILSON AVE	
CITY-ST-ZIP	PENSACOLA FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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		
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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:

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

Edward Bryan

01/03/01 (850) 458-0466

Date

Daytime Phone #

FILED
Jan 08, 2001 8:00 am
Secretary of State

01-08-2001 90060 042 ****70.00



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)



Neighborhood Enterprise Foundation, Inc.

Post Office Box 18178
Pensacola, Florida 32523-8178
Phone 850-458-0466
TDD# 850-458-0464

Attendment

N44917

DO000609

January 3, 2001

Division of Corporations
Uniform Business Report Filings
Post Office Box 1500
Tallahassee, Florida 32302-1500

Dear Sir/Madam:

Enclosed please find the 2001 Uniform Business Report (UBR) for the Neighborhood Enterprise Foundation, Inc., and our check in the amount of \$70.00 for the Filing Fee (\$61.25) and a Certificate of Status (\$8.75).

Should you have any questions, please call me or Mr. Edward Bryan, Secretary, at (850)458-0466.

Sincerely,

Denise C. Manna

Denise C. Manna
Finance Director