

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000005497

1. Entity Name

THE UNCOMMON FRIENDS FOUNDATION, INC.

Principal Place of Business

2115 SECOND STREET
#331
FT MYERS FL 33901
US

Mailing Address

PO BOX 811
FT MYERS FL 33902
US

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

65-0490124

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCCORMICK, DAVID
12833 YACHT CLUB CIRCLE
FORT MYERS FL 33919

7. Name and Address of New Registered Agent

Name

REGINALD L. Knight

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

1416 SE 30th Terrace

City

Cape Coral

FL

Zip Code

33904

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 REGINALD L. Knight, EXECUTIVE DIRECTOR

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

3/28/01

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 DP
NAME ALBION, JOHN ☐ Delete
STREET ADDRESS 9758 COUNTRY OAKS
CITY-ST-ZIP FORT MYERS FL 33912

TITLE DV
NAME MYERS, FRAN ☐ Delete
STREET ADDRESS 21461 WIDGEON TERRACE
CITY-ST-ZIP FORT MYERS BEACH FL 33931

TITLE S ☒ Delete
NAME VAN COONEY, JODY
STREET ADDRESS 14221 PATTY BERG DRIVE
CITY-ST-ZIP FORT MYERS FL 33919

TITLE D ☒ Delete
NAME HOOLIHAN, KERREY
STREET ADDRESS 6068 EAGLE WATCH CT
CITY-ST-ZIP N FORT MYERS FL

TITLE DT ☐ Delete
NAME SCULLION, DAVID
STREET ADDRESS 8191 COLLEGE PKWY
CITY-ST-ZIP FT MYERS FL

TITLE D ☐ Delete
NAME ROBINSON, DAVID DR.
STREET ADDRESS 5668 JEREZ COURT
CITY-ST-ZIP FORT MYERS FL 33917

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE DV ☐ Change ☒ Addition
NAME Steven R. Whitley
STREET ADDRESS 2075 WEST FIRST ST.
CITY-ST-ZIP FORT MYERS, FL 33901

TITLE S ☐ Change ☒ Addition
NAME Sandra Stilwell
STREET ADDRESS 11509 Andy Rosse Lane
CITY-ST-ZIP Captiva, FL 33924

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/01

941-335-2110

Date

Daytime Phone #

CR2E037 (10/00)

0068275

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90130 043 ****70.00

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