

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2002 8:00 am
Secretary of State

03-22-2002 90057 044 ****70.00

DOCUMENT # N94000002058

1. Entity Name

MAKE-A-WISH FOUNDATION OF CENTRAL FLORIDA, INC.

Principal Place of Business

Mailing Address

663 HAROLD AVENUE
 WINTER PARK FL 32789
 US

663 HAROLD AVENUE
 WINTER PARK FL 32789
 US

327000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

1053 N. Orlando Avenue
 Suite, Apt. #, etc.
 Suite 1

1053 N. Orlando Avenue
 Suite, Apt. #, etc.
 Suite 1

City & State

City & State

Maitland, FL

Maitland, FL

4. FEI Number

59-3235806

Applied For

Not Applicable

Zip
 32751

Country
 Orange

Zip
 32751

Country
 Orange

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

KINNEY, ROBERT J.
 1920 S. PARK AVENUE
 SANFORD FL 32771

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

Robert J. Kinney

2/28/02

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	CD	<input type="checkbox"/> Delete
NAME	WILLIAM, JEFF	
STREET ADDRESS	3974 ST ARMEN'S	
CITY-ST-ZIP	MELBOURNE FL 32934	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	SITARIK, SHERRIE	
STREET ADDRESS	320 HEMMINGWAY COURT	
CITY-ST-ZIP	OVIEDO FL 32765	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	MOORE, JOE D	
STREET ADDRESS	1521 WEST GRANADA BLVD.	
CITY-ST-ZIP	ORMOND BEACH FL 32174	
TITLE	SD	<input type="checkbox"/> Delete
NAME	CANNON, JEFFREY	
STREET ADDRESS	1510 MIZELL AVENUE	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE	VD	<input type="checkbox"/> Delete
NAME	LAMM, DAVID R	
STREET ADDRESS	1250 ALEXA DRIVE	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE	P	<input type="checkbox"/> Delete
NAME	KINNEY, ROBERT	
STREET ADDRESS	1920 S PARK AVENUE	
CITY-ST-ZIP	SANFORD FL 32771	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Julian, Matthew P.	
STREET ADDRESS	1942 Lost Spring Court	
CITY-ST-ZIP	Longwood, FL 32779	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Emerson, Sherry R.	
STREET ADDRESS	617 Mulberry Avenue	
CITY-ST-ZIP	Celebration, FL 34747	
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		

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: X

Robert J. Kinney
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

2/28/02 (407) 622-4673

CR2E037 (9/01)

Attachment

932656

N94000002058

D

Mabry, Paul S.
1218 East Langley Court
Heathrow, FL 32746

D

Moore, Joe D.
864 Sylvia Drive
Deltona, FL 32725

D

Mullineaux, Kathy C.
401 Rodebaugh Court
Longwood, FL 32779

D

Sleaford, Michael L.
2218 Dogwood Circle
Mount Dora, FL 32757

D

Wall, Judith E. MD
6283 Indian Meadow Street
Orlando, FL 32819

Attachment 932652
N94000002058

Make A Wish foundation of Central & Northern Florida, Inc.
#N94000002058

Officers and Directors

D

Allen, Edward
4312 Down Point Lane
Windermere, FL 34786

D

Byrd, Tucker H.
178 Ward Drive
Winter Park, FL 32789

D

DeLong, George
1443 Conway Isle Circle
Orlando, FL 32809

D

D'Orso, Chris J.
7913 canyon Lake Circle
Orlando, FL 32835

D

Dyer, Buddy
1013 Bryn Mawr
Orlando, FL 32804

D

Heller, Steven J.
1509 East Jefferson Street
Orlando, FL 32801

D

Jasmund, Lisa D.
916 Seville Place
Orlando, FL 32804

D

LaPaglia, Joseph R.
206 Chestnut Ridge Street
Winter Springs, FL 32708