

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000002363

1. Entity Name
FLORIDA LEAGUE OF CONSERVATION VOTERS
EDUCATION FUND, INC

Principal Place of Business Mailing Address
6408 Stone ST TRAIL PO BOX 11033
TALLAHASSEE TALLAHASSEE FL 32308
FL 32308

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country
US US

4. FEI Number 59-3256652 Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BRIAN PARADISE
2831 WOOD VALLEY CT
JACKSONVILLE FL 32217

7. Name and Address of New Registered Agent
Name NANCY BROWN
Street Address (P.O. Box Number is Not Acceptable)
6408 Stone ST TRAIL
City TALLAHASSEE FL Zip Code 32308

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 Nancy Louise Brown 30 April 2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) 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	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition
STREET ADDRESS	<u>PRESIDENT</u>		STREET ADDRESS	<u>NANCY BROWN</u>	
CITY-ST-ZIP	<u>6408 Stone ST TRAIL</u>		CITY-ST-ZIP	<u>DAN HENDRICKSON, 704 W. MADISON</u>	
	<u>TALLAHASSEE, FL 32308</u>			<u>TALLAHASSEE, FL 32304</u>	
TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition
STREET ADDRESS	<u>SECRETARY</u>		STREET ADDRESS	<u>BEKA MARTIN</u>	
CITY-ST-ZIP	<u>JOE SIVY</u>		CITY-ST-ZIP	<u>3651 CHERRY BLUFF LANE</u>	
	<u>2648 BROOKSIDE CT</u>			<u>TALLAHASSEE FL 32312</u>	
	<u>MAITLAND FL 32751</u>		TITLE	NAME	☐ Change ☐ Addition
TITLE	<u>DIRECTOR</u>	☐ Delete	STREET ADDRESS	<u>WALTER DARTLAND</u>	
STREET ADDRESS	<u>MAURICE COMAN</u>		CITY-ST-ZIP	<u>2086 WILDRIDGE RD</u>	
CITY-ST-ZIP	<u>4984 HARP ST</u>			<u>TALLAHASSEE, FL 32303</u>	
	<u>JACKSONVILLE FL 32258</u>		TITLE	NAME	☐ Change ☐ Addition
TITLE	<u>DIRECTOR</u>	☐ Delete	STREET ADDRESS	<u>DICK BATCHELOR</u>	
STREET ADDRESS	<u>GORDON WILLIAMSON</u>		CITY-ST-ZIP	<u>201 SOUTH ORANGE AVE, STE 960</u>	
CITY-ST-ZIP	<u>1400 MORAVIA AVE</u>			<u>ORLANDO, FL 32801</u>	
	<u>HOLLY HILL, FL 32117</u>		TITLE	NAME	☐ Change ☐ Addition
TITLE	<u>DIRECTOR</u>	☐ Delete	STREET ADDRESS	<u>SUSAN WOOD</u>	
STREET ADDRESS	<u>ANITA DAVIS</u>	☒ ADDITION	CITY-ST-ZIP	<u>#39 OSWEGO AVE</u>	
CITY-ST-ZIP	<u>708 BRAGG DR</u>			<u>TAKOMA PARK, MD 20910</u>	
	<u>TALLAHASSEE, FL 32310</u>		TITLE	NAME	☐ Change ☒ Addition
TITLE	☐ Delete		STREET ADDRESS	<u>AILSA CURIEL</u>	
STREET ADDRESS			CITY-ST-ZIP	<u>116 S. JACKSON ST.</u>	
CITY-ST-ZIP				<u>QUINCY FL 3235</u>	

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: Dan Hendrickson 4-30-01 850/425-0616
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED
May 21, 2001 8:00 am
Secretary of State
05-21-2001 90406 004 ****61.25

DO NOT WRITE IN THIS SPACE

CR2E037 (11/00)

Attachment Doc# N94000000363
C0068797

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July 2000

Dick Batchelor
201 South Orange Ave.
Suite 960
Orlando, FL 32801

Nancy Brown
6408 Stone St. Trail
Tallahassee, FL 32308

Maurice Coman
4984 Harp St.
Jacksonville, FL 32258

Walter Dartland
2086 Wildridge Rd.
Tallahassee, FL 32303

Dan Hendrickson
P.O. Box 1201
Tallahassee, FL 32302

Becca Martin
3651 Cherry Bluff Lane
Tallahassee, FL 32312

Joseph Stry, PhD.
2648 Brookside Ct.
Maitland, FL 32751

Gordon Williamson
1400 Moravia Ave.
Holly Hill, FL 32117

Susan F. Wood, PhD.
#39 Oswego Ave.
Takoma Park, MD 20910