

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0001636

DOCUMENT # N94000003907

1. Entity Name

GREATER LOVE FOOD BANK, INC.



2. Principal Place of Business

1000 PAUL RUSSELL ROAD
TALLAHASSEE FL 32301

Mailing Address

1407 WEKEWA NENE
TALLAHASSEE FL 32301

2. Principal Place of Business

1407 Wekewa Nene

3. Mailing Address

(Same)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tallahassee FL

City & State

4. FEI Number 59-3293744

Applied For

Not Applicable

Zip

32301

Country

U.S.

Zip

Country

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

FRANKLIN, JOSEPH D III
1407 WEKEWA NENE
TALLAHASSEE FL 32301

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. I am familiar with, and accept the obligations of registered agent.

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

After September 10, 2003, min will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

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\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME FRANKLIN, JOSEPH D III
STREET ADDRESS 1407 WEKEWA LANE
CITY-ST-ZIP TALLAHASSEE FL 32301 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 700022886557
CITY-ST-ZIP 03/09/03--01073--012 **61.25

TITLE VPD
NAME WEAVER, CHARLES
STREET ADDRESS 3127 S.FULMER CIRCLE
CITY-ST-ZIP TALLAHASSEE FL 32303 ☐ Delete

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

TITLE SD
NAME STERLING, ROSIA
STREET ADDRESS 8636 STAR GATE WAY
CITY-ST-ZIP TALLAHASSEE FL 32308 ☐ Delete

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

TITLE TD
NAME STALLWORTH, STELLA
STREET ADDRESS 4250 PLEASANT DRIVE
CITY-ST-ZIP TALLAHASSEE FL 32303 ☒ Delete

TITLE TD
NAME Velma Panermon
STREET ADDRESS 906 Kendal DR.
CITY-ST-ZIP Tallahassee, FL 32301 ☐ Change ☒ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME Tracy D. Jenkins
STREET ADDRESS 4081 Old Lloyd
CITY-ST-ZIP Monticello, FL 32344 ☐ Change ☒ Addition TS

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 information.

SIGNATURE:

Joseph D. Franklin 08/29/03

CR2E037 (4/03)