

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000005337

1. Entity Name

LEDGERPLUS NATIONAL ADVERTISING FUND, INC.

**FILED**  
Mar 05, 2001 8:00 am  
Secretary of State

03-05-2001 90284 049 \*\*\*\*61.25

0000456

Principal Place of Business

401 ST. FRANCIS STREET  
TALLAHASSEE FL 32301

Mailing Address

401 ST. FRANCIS STREET  
TALLAHASSEE FL 32301

724504

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

59-3302854

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HARRISON, JOHN  
401 ST. FRANCIS STREET  
TALLAHASSEE FL 32301

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 PD ☒ Delete  
NAME WALDRUFF, ROBERT  
STREET ADDRESS JEFFERSON BLDG., 8100 3 STEP RD.  
CITY-ST-ZIP RICHMOND VA 23229

TITLE VD ☐ Delete  
NAME TRACY, THOMAS A  
STREET ADDRESS 3118 PARK AVE. STE 106  
CITY-ST-ZIP MEMPHIS TN 38117

TITLE SD ☒ Delete  
NAME HARRISON, TED  
STREET ADDRESS 401 ST FRANCIS ST  
CITY-ST-ZIP TALLAHASSEE FL

TITLE DT ☒ Delete  
NAME LENG, KENNETH R  
STREET ADDRESS 1400 BOTTLE GROUND DR. STE 205  
CITY-ST-ZIP GREENSBORO NC 27408

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 SD ☒ Addition  
NAME RON BAKER  
STREET ADDRESS 401 ST. Francis ST  
CITY-ST-ZIP Tallahassee FL 32301

TITLE D ☒ Addition  
NAME David A Bankston  
STREET ADDRESS 8910 N. Dale Mabry Hwy Suite 12  
CITY-ST-ZIP Tampa, FL 33614

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:

*RON BAKER* SD 2/20/01 850-681-1941  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)