

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N94000005970**

1. Entity Name

THE SNOWDEN FOUNDATION, INCORPORATED**FILED****May 27, 2002 8:00 am**
Secretary of State

05-27-2002 90288 038 ****61.25

Principal Place of Business

Mailing Address

**10613 CHARLESTON DR
VERO BEACH FL 32963****10613 CHARLESTON DR
VERO BEACH FL 32963**

2. Principal Place of Business

10590 ETON WAY

Suite, Apt. #, etc.

3. Mailing Address

10590 ETON WAY

Suite, Apt. #, etc.

City & State

VERO BEACH, FL 32963

City & State

VERO BEACH, FL

4. FEI Number

65-0551914

Applied For

Not Applicable

Zip

32963

Country

USA

Zip

32963

Country

USA5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**SNOWDEN, DIANE P
10613 CHARLESTON DR
VERO BEACH FL 32963**

7. Name and Address of New Registered Agent

Name **DIANE P. SNOWDEN**Street Address (P.O. Box Number is Not Acceptable)
10590 ETON WAYCity **VERO BEACH****FL**Zip Code
32963

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 \$61.259. 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 ☐ Delete
NAME **D SNOWDEN, GUY B**
STREET ADDRESS **10613 CHARLESTON DR**
CITY-ST-ZIP **VERO BEACH FL 32963**TITLE ☐ Delete
NAME **D SNOWDEN, DIANE P**
STREET ADDRESS **10613 CHARLESTON DR**
CITY-ST-ZIP **VERO BEACH FL 32963**TITLE ☐ Delete
NAME **D MALIKOW, LOUIS R**
STREET ADDRESS **44 ROBINWOOD DR**
CITY-ST-ZIP **CLIFTON PARK NY 12065**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME **SNOWDEN, GUY B**
STREET ADDRESS **10590 ETON WAY**
CITY-ST-ZIP **VERO BEACH, FL 32963**TITLE ☒ Change ☐ Addition
NAME **SNOWDEN, DIANE P.**
STREET ADDRESS **10590 ETON WAY**
CITY-ST-ZIP **VERO BEACH, FL 32963**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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 another I am empowered.

SIGNATURE:

Guy B. Snowden
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)