

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

95 MAY -1 AM 9:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000006046 (6)

1. Corporation Name

UPTOWN CIVITAN CHARITABLE FOUNDATION, INC.

Principal Place of Business

Mailing Address

4417 BEACH BLVD. 306
JACKSONVILLE FL 32207-4732

4417 BEACH BLVD. 306
JACKSONVILLE FL 32207-4732

800001517228
-06/20/95--01039--023
****130.00 ****130.00
DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

12/09/1994

4. FEI Number

Applied For

Not Applicable

59-32960955

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH HULSEY & BUSEY, P.A.
1800 FIRST UNION NATIONAL BANK TOWER
225 WATER ST
JACKSONVILLE FL 32202

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

P
Tanner, Dorcas
3311 Beach Blvd.
Jacksonville, FL 32207-1462

SD
Braswell, Twinda
100 Festival Park Ave.
Jacksonville, FL 32202-1397

VD
Grant, Alicia
3575 Riverside Ave.
Jacksonville, FL 32205-8128

D
Scott, Gwen
1563 Windy Oaks Dr. West
Jacksonville, FL 32225-2829

TD
Caplan, Betsy
4417 Beach Blvd. Suite 306
Jacksonville, FL 32207

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Here

0001448