

2001 UNIFORM BUSINESS REPORT (UBR)

4/30/1

FILED
Jun 05, 2001 8:00 am
Secretary of State

04-30-2001 90054 048 ****61.25

DOCUMENT # N95000002167

1. Entity Name

FRIENDS ACROSS THE SEA, INC.

Principal Place of Business

Mailing Address

9737 PRESTON TRAIL
 PONTE VEDRA BEACH FL 32082
 US

9737 PRESTON TRAIL
 PONTE VEDRA BEACH FL 32082
 US

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

59-3348609

Applied For

Not Applicable

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

MORGAN, JACK
9737 PRESTON TRAIL
PONTE VEDRA BEACH FL 32082

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS HICKS, DEBORAH ☒ Delete 104 GRANADA LANE PONTE VEDRA BEACH FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MORGAN, JACK ☒ Delete 9737 PRESTON TRAIL PONTE VEDRA BEACH FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP GEBHART, MARY ☒ Delete 23 VILLAGE WALK CT. PONTE VEDRA BEACH FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT KIRBY, PAULI ☐ Delete 113 ALSACE CT PONTE VEDRA BEACH FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOLOT, JOSEPHINE ☒ Delete 121 ALSACE CT PONTE VEDRA BEACH FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAGE, FRED ☐ Delete 567 BISHOP GATE LANE JACKSONVILLE FL 32204

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President ☒ Change ☐ Addition Rooney, Jackie 9852 Preston Tr. West Ponte Vedra, FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer ☒ Change ☐ Addition Dugg, Susan 231 San Juan Dr. Ponte Vedra, FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President ☒ Change ☐ Addition Kirby, Pauli ☒ Change 2734 St. Louis Ct. Ponte Vedra, FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary ☒ Change ☐ Addition Petersen, Wanda ☒ Change 116 Osprey Ridge Ponte Vedra, FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director ☒ Change ☐ Addition Page, Fred 6002 Bridgewater Circle Ponte Vedra, FL 32082

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Signature of Treasurer 4-19-01 904.285.1950

CR2E037 (12/00)