

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000002475

1. Entity Name

BUDD BELL FOUNDATION, INC.

Principal Place of Business

2107 WOODSTOCK LANE  
TALLAHASSEE FL 32303

Mailing Address

2107 WOODSTOCK LANE  
TALLAHASSEE FL 32303

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3321831

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BELL, BUDD BUDD  
411 EAST COLLEGE AVE  
TALLAHASSEE FL 32301

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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  
After September 12, 2001, min. will be \$236.25

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  
NAME BELL, B L  
STREET ADDRESS 2107 WOODSTOCK LANE  
CITY-ST-ZIP TALLAHASSEE FL 32303 ☐ Delete

TITLE VTD  
NAME ALBRITTON, GAIL K  
STREET ADDRESS 1732 SILVERWOOD DR  
CITY-ST-ZIP TALLAHASSEE FL ☐ Delete

TITLE SD  
NAME WOOD, GLENDA M  
STREET ADDRESS 2983 BAYSHORE DRIVE  
CITY-ST-ZIP TALLAHASSEE FL ☒ Delete

TITLE T  
NAME FISHER, TAD P  
STREET ADDRESS 411 EAST COLLEGE AVENUE  
CITY-ST-ZIP TALLAHASSEE FL 32301 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE SECOND VICE PRESIDENT  
NAME JEANNE BURHANS  
STREET ADDRESS P.O. BOX 15944  
CITY-ST-ZIP TALLAHASSEE, FL 32317-5944 ☒ Change ☐ Addition

TITLE SECRETARY  
NAME CHRISTINE FISHER  
STREET ADDRESS 411 EAST COLLEGE AVE  
CITY-ST-ZIP TALLAHASSEE, FL 32301 ☐ Change ☒ Addition

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

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

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 REQUIRED

9/4/01 (850) 562-1504

FILED  
Sep 10, 2001 8:00 am  
Secretary of State

09-10-2001 90004 016 \*\*\*\*61.25

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DO NOT WRITE IN THIS SPACE

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