2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000002599

FILED Apr 11, 2002 8:00 AM Secretary of State

Entity Name: JOHN REYNOLDS & ELEANOR B. ALLEN CHARITABLE FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4100 BARNETT PLAZA 100 S. ASHLEY DRIVE 101 E. KENNEDY BLVD. SUITE 1500

TAMPA, FL 33602 TAMPA, FL 33602

Current Mailing Address: New Mailing Address:

4100 BARNETT PLAZA
100 S. ASHLEY DRIVE
101 E. KENNEDY BLVD.
SUITE 1500
TAMPA, FL 33602
TAMPA, FL 33602
TAMPA, FL 33602

FEI Number: 59-3317122 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KALISH, WILLIAM
101 E. KENNEDY BLVD.
SUITE 4100
TAMPA, FL 33602 US

KALISH, WILLIAM
100 S. ASHLEY DRIVE
SUITE 1500
TAMPA, FL 33602 US

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: 04/11/2002

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: KALISH, WILLIAM Name: KALISH, WILLIAM Address: 101 E. KENNEDY BLVD., SUITE 4100 Address: 100 S. ASHLEY DRIVE, SUITE 1500

City-St-Zip: TAMPA, FL 33602 City-St-Zip: TAMPA, FL 33602

Title: DT () Delete Title: () Change () Addition

 Name:
 WARD, ALTON C
 Name:

 Address:
 101 E. KENNEDY BLVD., SUITE 4100
 Address:

 City-St-Zip:
 TAMPA, FL 33602
 City-St-Zip:

Title: VSD () Delete Title: () Change () Addition

 Name:
 HANEY, REID R
 Name:

 Address:
 101 E. KENNEDY BLVD., SUITE 4100
 Address:

 City-St-Zip:
 TAMPA, FL 33602
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM KALISH PD 04/11/2002