2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000004635

1. Entity Name

ENGLEWOOD NEIGHBORHOOD IMPROVEMENT CORPORATION



FILED Apr 17, 2003 8:00 am Secretary of State

04-17-2003 90110 003 ****61.25

Principal Plac							
	ce of Business	Mailing Address					
2751 NORTH H STREET PENSACOLA FL 32501		PO BOX 18334 PENSACOLA FL 32523-8398				•	
		US		1 10 11 10 10 10 10 10 10 10 10 10 10 10		[
2. Principal F	Place of Business	3. Mailing Address					
Suite, Apt	:. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES			
City & Sta	ile	- City & State		4. FEI Number 59-3445733 Applied For			
Zip Country		Zip	Country	5. Certificate of Stat	us Desired	\$8.75 Add	
	6. Name and Address of Curren	Registered Agent	· · ·	7. Name and Addre	ss of New Registered	Fee Require Agent	<u>a</u>
-			Name				
	/, ethel l . Catherine ave }		Street Addres	Street Address (P.O. Box Number is Not Acceptable)			
PENSAC	COLA FL 32501		City				
<u> </u>					FL	Zip Cod	
3. The above	e named entity súbmits this statement f tions of registered agent.	or the purpose of changing its	registered office or regis	tered agent, or both, in th	e State of Florida. I am	familiar with,	and accept
		•					
SIGNATURE							
<u> </u>	Signature, typed or printed name of registered agen	, and title if applicable. (NOTE:	: Registered Agent signature requ	ired when reinstating)	DATE		
<u> </u>	FILE NOW: FEE IS \$61.25	9. Election Cam Trust Fund Co	npaign Financing	\$5.00 May Be Added to Fees	Make Check		
. 4-4		nual Fund Of	ontribution.	Added to Fees	Florida Depar	tment of a	state
10.	OFFICERS AND D	RECTORS	11.	ADDITIONS/CHANGES	TO OFFICERS AND DI	RECTORS IN	10
ritle Name	DV LINDSEY, ETHEL L	☐ Delete	TITLE NAME			☐ Change	☐ Addition
STREET ADDRESS	1916 ST CATHERINE AVE		STREET ADDRESS				
CITY-ST-ZIP	PENSACOLA FL 32501						
	00		CITY-ST-ZIP				
TITLE	SD	☐ Delete	1	· · · • • • • • • • • • • • • • • • • •		☐ Change	Addition
NAME	ROYSTER, IDA	☐ Delete	CITY-ST-ZIP TITLE NAME		· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
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2. 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

4-14-03 850-43