

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 08, 2002 8:00 am
Secretary of State

04-08-2002 90248 011 ****61.25

DOCUMENT # N96000001838

1. Entity Name

FLEMING-LEES FOUNDATION, INC.

Principal Place of Business

Mailing Address

321 ROYAL POINCIANA PLAZA
 PALM BEACH FL

321 ROYAL POINCIANA PLAZA
 PALM BEACH FL

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

65 CLIFFSIDE CROSSING

City & State

City & State
 ATLANTA, GA

4. FEI Number

65-0660155

Applied For

Not Applicable

Zip

Country

Zip

Country

30350-3704

FULTON

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

Name

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

City

FL

Zip Code

LINDSAY, ALAN
 321 ROYAL POINCIANA PLAZA
 PALM BEACH FL

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
 DPST
 LEES, IRVING B
 321 ROYAL POINCIANA PLAZA
 PALM BEACH FL ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 DPST
 LEES, IRVING B.
 65 CLIFFSIDE CROSSING
 ATLANTA, GA 30350-3704 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 DV
 LEES, MAJORIE F
 321 ROYAL POINCIANA PLAZA
 PALM BEACH FL ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Same
 Same
 65 CLIFFSIDE CROSSING
 ATLANTA, GA 30350-3704 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 GRANT, TRACY S
 443 NE 100 STREET
 MIAMI SHORE FL ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Same
 LEES GRANT, TRACY S.
 2 WINAY TERRACE
 LONG VALLEY, NJ 07853 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 FLEMING LEES FRENCH, KIMBERLY
 1075 CREEK RIDGE POINTE
 ALPHARETTA GA ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 LEES, MADISON T
 1705 DARTMOUTH LANE
 DEERFIELD IL ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 LEES JAMISON, LESLIE C
 725 TANGLEWOOD TRAIL
 ATLANTA GA ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Same
 Same
 216 MONTEREY ROAD
 PALM BEACH, FL 33480 ☒ 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)(l), 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:

IRVING B. LEES
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2 April 2002 (770) 650-9383

CR2E037 (9/01)