

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000002482

1. Entity Name

FLORIDA RESEARCH INSTITUTE, INC.

Principal Place of Business

2306 S.W. 13TH STREET #806
GAINESVILLE FL 32608

Mailing Address

2306 S.W. 13TH STREET #806
GAINESVILLE FL 32608

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

59-3378527

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

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 D
NAME LOCKHART, MADELYN
STREET ADDRESS 1877 NORTHWEST 19TH CIRCLE
CITY-ST-ZIP GAINESVILLE FL 32605 ☐ Delete

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

TITLE PSTD
NAME LYONS-LEPKE, ELAINE M
STREET ADDRESS 2610 S.W. 14TH DRIVE
CITY-ST-ZIP GAINESVILLE FL 32608 ☐ Delete

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

TITLE C
NAME LYONS-LEPKE, ELAINE M
STREET ADDRESS 2610 S.W. 14TH DRIVE
CITY-ST-ZIP GAINESVILLE FL 32608 ☐ Delete

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

TITLE VD
NAME LYONS, KENNETH J
STREET ADDRESS 2306 S.W. 13TH STREET #405
CITY-ST-ZIP GAINESVILLE FL 32608 ☐ Delete

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

TITLE D
NAME BECHTEL, GORDON
STREET ADDRESS 2250 N.W. 21ST AVENUE
CITY-ST-ZIP GAINESVILLE FL 32605 ☐ Delete

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

TITLE D
NAME STREIB, GORDON
STREET ADDRESS 2807 NW 83RD ST
CITY-ST-ZIP GAINESVILLE FL 32605 ☐ Delete

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:

Elaine M. Lyons-Lepke
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/02 352-336-6760
Date Daytime Phone #

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90165 024 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)