

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

DOCUMENT # **N96000005019**

1. Entity Name

VOTER ACTION, INC

FILED

02 MAY -3 PM 6:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

307 E. GULF BLVD

Suite, Apt. #, etc.

3. Mailing Address

307 E. GULF BLVD

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PANAMA CITY BEACH, FL

City & State

PANAMA CITY BEACH, FL

4. FEI Number

593508971

Applied For

Not Applicable

Zip

32413-2675

Country

BAH

Zip

32413-2675

Country

BAH

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

FRED EBBERS

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

307 E. GULF BLVD

1

City

PANAMA CITY BEACH

FL

Zip Code

32413-2675

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

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

Makes Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE

PD

NAME

EBBERS, FRED

STREET ADDRESS

307 E. GULF BLVD

CITY-ST-ZIP

PANAMA CITY BEACH, FL 32413-2675

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

300005556849-8

05/17/02-01028-003

******131.25 ****131.25**

TITLE

DT

NAME

HOOO, LEON

STREET ADDRESS

505 IV GULF BLVD

CITY-ST-ZIP

PANAMA CITY BEACH, FL 32413

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

DS

NAME

EVERETT, MARTHA

STREET ADDRESS

122 E SONATA CIRCLE

CITY-ST-ZIP

PANAMA CITY BEACH, FL 32413

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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STREET ADDRESS

CITY-ST-ZIP

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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Fred Ebbers**