

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Mar 11, 2002 8:00 am
Secretary of State

03-11-2002 90086 013 ****61.25

DOCUMENT # N96000005339

1. Entity Name

DEMETREE FAMILY FOUNDATION, INC.

Principal Place of Business

Mailing Address

**C/O ELISA A. DEMETREE
3740 BEACH BLVD SUITE 300
JACKSONVILLE FL 32207****C/O ELISA A. DEMETREE
3740 BEACH BLVD SUITE 300
JACKSONVILLE FL 32207**

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

59-3407379

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

**DEMETREE, ELISA A
3740 BEACH BLVD SUITE 300
JACKSONVILLE FL 32207**

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 \$61.259. 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	☐ Delete
NAME	DEMETREE, JACK C	
STREET ADDRESS	3740 BEACH BLVD SUITE 300	
CITY-ST-ZIP	JACKSONVILLE FL 32207	

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

TITLE	D	☐ Delete
NAME	DEMETREE, BETTY A	
STREET ADDRESS	3740 BEACH BLVD SUITE 300	
CITY-ST-ZIP	JACKSONVILLE FL 32207	

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

TITLE	D	☐ Delete
NAME	DEMETREE, MARK C	
STREET ADDRESS	3740 BEACH BLVD SUITE 300	
CITY-ST-ZIP	JACKSONVILLE FL 32207	

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

TITLE	D	☐ Delete
NAME	DEMETREE, JACK C JR	
STREET ADDRESS	3740 BEACH BLVD SUITE 300	
CITY-ST-ZIP	JACKSONVILLE FL 32207	

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

TITLE	D	☐ Delete
NAME	DEMETREE, ELISA A	
STREET ADDRESS	3740 BEACH BLVD SUITE 300	
CITY-ST-ZIP	JACKSONVILLE FL 32207	

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

TITLE	D	☐ Delete
NAME	DOHERTY, LESLIE D	
STREET ADDRESS	3740 BEACH BLVD SUITE 300	
CITY-ST-ZIP	JACKSONVILLE FL 32207	

TITLE		☐ Change ☐ Addition
NAME		
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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature Required
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/02

Date

904-396-7350

Daytime Phone #

CR2E037 (9/01)