## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N97000000878

Entity Name: TRIPP FAMILY FOUNDATION, INC.

FILED Jan 14, 2002 8:00 AM Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	I ST 15TH FL DERDALE, FL	33301	US				
Current Mailing Address:				New Mailing Address:			
110 SE 6TH ST 15TH FL FORT LAUDERDALE, FL 33301 US					ATTN: CHRISTINE P. YATES, ESQ. 110 SE 6TH ST 15TH FL FORT LAUDERDALE, FL 33301 US		
FEI Number: 65-0730801 FEI Number Applied For ( ) FEI Number				FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
TRIPP, NORMAN D 110 SE 6TH ST 15TH FL FORT LAUDERDALE, FL 33301 US							
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:							
Electronic Signature of Registered Agent					Date		
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D ( ) Delete TRIPP, NORMAN S 110 SE 6TH ST, 15TH FL FORT LAUDERDALE, FL 33301				Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete MICHAEL M TRIPP, 110 SE 6TH ST 15TH FL FT LAUDERDALE, FL 33301				Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete JENNIFER E WILLIS, 110 SE 6TH ST 15TH FL FT LAUDERDALE, FL 33301				Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete CHRISTINE P YATES, 110 SE 6TH ST 15TH FL FT LAUDERDALE, FL 33301				Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD () Delete JANE G TRIPP, 110 SE 6TH ST 15TH FL ip: FT LAUDERDALE, FL 33301				Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ne: NORMAN D TRIPP, ress: 110 SE 6TH ST 15TH FL				Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTINE P. YATES D 01/14/2002