

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90930 043 ****61.25



DO NOT WRITE IN THIS SPACE

DOCUMENT # N97000002334

1. Entity Name
LAMBERT FOUNDATION, INC.

Principal Place of Business Mailing Address
1025 FLAMEVINE LN. **1025 FLAMEVINE LN.**
VERO BEACH FL 32963 **VERO BEACH FL 32963-1964**

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 Applied For
65-0749367 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
LAMBERT, ROY H
1025 FLAMEVINE LN.
VERO BEACH FL 32963

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	LAMBERT, ROY H.	
STREET ADDRESS	1025 FLAMEVINE LANE STE 3	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	LAMBERT, PATSY J.	
STREET ADDRESS	1025 FLAMEVINE LANE STE 3	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	TS	<input type="checkbox"/> Delete
NAME	LOHUIS, NEAL R.	
STREET ADDRESS	1025 FLAMEVINE LANE STE 3	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	D	<input type="checkbox"/> Delete
NAME	DAVIS, DONNA G.	
STREET ADDRESS	1495 56TH SQUARE E	
CITY-ST-ZIP	VERO BEACH FL 32966	
TITLE	D	<input type="checkbox"/> Delete
NAME	LAMBERT, JR. R	
STREET ADDRESS	1025 FLAMEVINE LANE STE 3	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	D	<input type="checkbox"/> Delete
NAME	LAMBERT, RONALD S.	
STREET ADDRESS	1481 56TH SQUARE W	
CITY-ST-ZIP	VERO BEACH FL 32966	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 *Neal R. Lohuis* **NEAL R. LOHUIS, Treasurer** 561-231-4446

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)