

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90114 017 ****61.25

0047649

DOCUMENT # N98000002656

1. Entity Name

THE BOYNTON FAMILY FOUNDATION, INC.

Principal Place of Business

4620 RUE BAYOU
 SANIBEL FL 33957

Mailing Address

4620 RUE BAYOU
 SANIBEL FL 33957

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

65-0835766

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

BOYNTON, LYNN W
4620 RUE BAYOU
SANIBEL FL 33957

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

TITLE **PD** ☐ Delete
 NAME **BOYNTON, LYNN W**
 STREET ADDRESS **4620 RUE BAYOU**
 CITY-ST-ZIP **SANIBEL FL 33957**

TITLE **STD** ☐ Delete
 NAME **BOYNTON, JACQUELINE D**
 STREET ADDRESS **4620 RUE BAYOU**
 CITY-ST-ZIP **SANIBEL FL 33957**

TITLE **VD** ☐ Delete
 NAME **BOYNTON, MELBOURNE D**
 STREET ADDRESS **RR1 BOX 4401**
 CITY-ST-ZIP **RUTLAND VT 05701**

TITLE **VD** ☐ Delete
 NAME **MONTGOMERY, REBECCA B**
 STREET ADDRESS **10207 WILDBRACKEN COURT**
 CITY-ST-ZIP **CHARLOTTE NC 28210**

TITLE **VD** ☐ Delete
 NAME **BOYNTON, JENNIFER D**
 STREET ADDRESS **1106 SEWARD STREET 1-W**
 CITY-ST-ZIP **EVANSTON IL 60202**

TITLE **VD** ☐ Delete
 NAME **BOYNTON, CHARLES D**
 STREET ADDRESS **40 CANNES CT**
 CITY-ST-ZIP **DANVILLE CA 92506**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

TITLE ☒ Change ☐ Addition
 NAME **BOYNTON, JENNIFER D.**
 STREET ADDRESS **1730 W. 30TH ST.**
 CITY-ST-ZIP **AUSTIN, TX 78703**

TITLE ☒ Change ☐ Addition
 NAME **BOYNTON, CHARLES D.**
 STREET ADDRESS **1445 ARBOR LANE**
 CITY-ST-ZIP **ALAMO, CA 94507**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
LYNN W. BOYNTON

Date

Daytime Phone #

1/15/02
941 3951443

CR2E037 (9/01)