

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 08, 2001 8:00 am
Secretary of State

03-08-2001 90089 006 ****61.25

005643

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1. Entity Name

THE FOSTER FAMILY FOUNDATION, INC.

Principal Place of Business

Mailing Address

**1201 GEORGE BUSH BLVD.
DELRAY BEACH FL 33483**

**1201 GEORGE BUSH BLVD.
DELRAY BEACH FL 33483**

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

65-0849492

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

**CHAPIN, ROBERT D
1201 GEORGE BUSH BLVD.
DELRAY BEACH FL 33483**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DTS
HUTCHINSON, PATRICIA F
3 STANDISH DRIVE
RIDGEFIELD CT 06877** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Foster, Benjamin E.
88 Shaker Rd
Harvard, MA 01451** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HUTCHINSON, PATRICIA F
3 STANDISH DRIVE
RIDGEFIELD CT 06877** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Patricia F. Hutchinson,
3 Standish Dr.
Ridgefield, CT 06877** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
JACKSON, VIRGINIA F
476 SYLVANIA DRIVE
MCMURRAY PA 15317** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
FOSTER, MARY R
1430 DRESHERTOWN ROAD
DRESHER PA 19025** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DE MARCO, DEBORAH F
29 ELIOT STREET
SHERBORN MA 01770** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DeMarco, Deborah F
131 Farm Street
Dover, MA 02030** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SCHMERGE, JUDITH F
4670 HUNTRIDGE DR.
ROSWELL GA 30075** ☐ Delete

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

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: VIRGINIA F JACKSON *Virginia F Jackson* **2/24/01** **3199**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)