FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Apr 26, 2001 8:00 am Secretary of State DOCUMENT # N9800003024 1. Entity Name THE LASTINGER FAMILY FOUNDATION, INC. Principal Place of Business Mailing Address 1145 CAMPBELL AVENUE 1145 CAMPBELL AVENUE JACKSONVILLE FL 32207 JACKSONVILLE FL 32207 2. Principal Place of Business 3. Mailing Address 8342 AlA South 8342 AlA South Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3512737 St. Augustine, Florida St. Augustine, Florida Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 32086 USA USA 32086 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 111 North Orange Avenue SALLEY, STEPHEN G 390 NORTH ORANGE AVENUE #2500 20th Floor ORLANDO FL 32801 Örlando <sup>Zip</sup> 2801 FL 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 it applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: **\$5.00** May Be Make Check Pavable to Trust Fund Contribution. FEE IS \$61.25 Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. (10/00)TITLE ☐ Delete TITLE **XX**Channe ☐ Addition LASTINGER, ALLEN L JR NAME NAME 1145 CAMPBELL AVENUE 8342 AlA South STREET ADDRESS STREET ADDRESS CITY-ST-7IP JACKSONVILLE FL 32207 CITY-ST-ZIP St. Augustine, Florida TITLE ☐ Delete TITLE **XX**Change ☐ Addition LASTINGER, DELORES T NAME 1145 CAMPBELL AVENUE STREET ADDRESS STREET ADDRESS 8342 AlA South CITY-ST-ZIP JACKSONVILLE FL 32207 CITY-ST-ZIP St. Augustine, Florida 32086 TITLE ☐ Delete TITLE **XX**Change ☐ Addition LASTINGER, LANE NAME NAME 8342 AlA South 1145 CAMPBELL AVENUE STREET ADDRESS. STREET ADDRESS St. Augustine, Florida CITY-ST-ZIP JACKSONVILLE FL 32207 CITY-ST-ZiP TITLE ☐ Delete TITLE XX Change Addition LASTINGER, BETH NAME 8342 AlA South STREET ADDRESS 1145 CAMPBELL AVENUE STREET ADDRESS St. Augustine, Florida CITY-ST-ZIP 32086 JACKSONVILLE FL 32207 CITY-ST-ZIP TITLE ☐ Delete XX Change Addition RIGGS, LINDSEY NAME 8342 AlA South STREET ADDRESS 1145 CAMPBELL AVENUE STREET ADDRESS CITY-ST-7IP JACKSONVILLE FL 32207 CITY-ST-ZIP St. Augustine, Florida 32086 TITLE ☐ Delete TITLE XX Change ☐ Addition RIGGS, RYAN NAME NAME 8342 AlA South STREET ADDRESS 1145 CAMPBELL AVENUE STREET ADDRESS CITY-ST-ZIP St. Augustine, Florida JACKSONVILLE FL 32207 12. Thereby 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.

an address, with all other like empowered Daytime Phone #

attachment

FLORIDA DEPARTMENT OF STATE, DIVISION OF CORPORATIONS 2001 UNIFORM BUSINESS REPORT

Document # N98000003024

The Lastinger Family Foundation, Inc.

## #N9800003034

## Block 10 and Block 11

Title Name

Street Address City, State, Zip D

XX Change

Vigilante, Amy 8342 A1A South

St. Augustine, Florida 32086

Title Name

Street Address City, State, Zip D

XX Addition

Vigilante, Jason 8242 AlA South

St. Augustine, Florida 32086