2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000006685

1. Entity Name

CHAMBERLYNE FOUNDATION, INC.



FILED
Mar 19, 2003 8:00 am
Secretary of State
03-19-2003 90114 029 ****70.00

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Principal Place of Business				ng Address		<u> </u>					
2215 AVE. A.NORTHWEST WINTERHAVEN FL 33880			1323 MIRROR TERR NW WINTER HAVEN FL 33881								
Principal Place of Business 3.				iling Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES			
City & State			City & State			4. FEI Number 59-3542985 Applied For]	
Zip Country			Zi	þ	Co	untry	5. Certificate of S	Status Desired	\$8.75 Ad		
6. Name and Address of Current Regist				ared Agent			7. Name and Address of New Registered Agent				
	U. Hame a		negister	eu Agent		Name	7. Name and Au	uress or New negrs	tered Agent		ł
RYAN, JOHN A			we to a	المحاشين والانتصاف الوادات		The property of the second sec					
2215 AVE. A,NORTHWEST WINTERHAVEN FL 33880						Street Address	s (P.O. Box Number is	Not Acceptable)			
AMATERISACIA I C 22000				·,		City	FL Zip Code				
R The above	named entity e	ubmits this statement fo	the pur	one of changing its	rogiotor	ad office or regist	roend agent, or both, in	the State of Elevide		and accept	-
the obligat	tions of registere		the part	react of changing its	register	ed office of regist	ered agent, or both, ii	Title State of Fronda.	Tan familia With,	and accept	
SIGNATURE.		printed name of registered agent	and title if ap	plicable. (NOTE	: Registere	d Agent signature requi	red when reinstating)		DATE		
FILE NUVY: FEE 13 301.23					9. Election Campaign Financing Trust Fund Contribution.				Check Payable epartment of S		
10.		OFFICERS AND DIF	ECTORS		11.		ADDITIONS/CHANG	ES TO OFFICERS A	ND DIRECTORS IN	I 10	1
TITLE	D OF FIGURE 2415 BINE			☐ Delete		I		220 70 01 1021071	☐ Change	Addition	ŝ
NAME	LEONARD, I	RAYMOND D			NAM	E					(10/02
STREET ADDRESS 1323 MIRROR TERR.,N.W.				STRE	ET ADDRESS						
CITY-ST-ZIP	WINTERHAV	EN FL 33881			CITY	- ST-ZIP					F037
TITLE	D			☐ Delete	TITL	• • • • • • • • • • • • • • • • • • •			Change	☐ Addition	٦
NAME	RYAN, JOH				NAM	- 1					_
STREET ADDRESS CITY-ST-ZIP	1	,NORTHWEST				ET ADDRESS					1
		EN FL 33880			_	-ST-ZIP					
TITLE NAME	U Gurr, T.Mi	MEI I		Delete	NAM	2.5			☐ Change	☐ Addition	
STREET ADDRESS	135 VAN FL					ET ADDRESS					ĺ
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TITLE	71050141514			☐ Delete	TITL				☐ Change	☐ Addition	
NAME				<u> </u>	NAM						
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TITLE NAME				☐ Delete	TITLE	l			☐ Change	☐ Addition	
STREET ADDRESS					NAM STRE	ET ADDRESS		•			l
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	ertify that the in	formation supplied with	this filma	does not qualify for			Section 119 07(3)(i) FI	orida Statutes I furth	er certify that the in	oformation	

indicated on this report or supplemental leport is the anniaccurate 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 of 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 a lother like impowered.