

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000006747

1. Entity Name

THE EVA MAE HURST CHARITABLE FOUNDATION, INC.

**FILED**  
**Feb 19, 2000 8:00 am**  
**Secretary of State**

02-19-2000 90001 027 \*\*\*\*61.25

Principal Place of Business

Mailing Address

950 S. WINTER PARK ROAD #301  
CASSELBERRY FL 32718

950 S. WINTER PARK ROAD #301  
CASSELBERRY FL 32826-3714

2. Principal Place of Business

1025 E. Semoran Blvd

3. Mailing Address

1025 E. Semoran Blvd.

Suite, Apt. #, etc.

STE. 1093

Suite, Apt. #, etc.

STE. 1093

City & State

Winter Park FL

City & State

Winter Park FL

Zip

32792

Country

US

Zip

32792

Country

US



DO NOT WRITE IN THIS SPACE

4. FEI Number

91-1938570

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

A.G.C. CO.  
200 S. ORANGE AVENUE  
SUITE 2300  
ORLANDO FL 32801

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 P ☐ Delete  
NAME HECTOR A. TICO PEREZ  
STREET ADDRESS 950 S. WINTER PARK ROAD #301  
CITY-ST-ZIP CASSELBERRY FL 32718

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

TITLE T ☐ Delete  
NAME HERBST, RICHARD  
STREET ADDRESS 950 S. WINTER PARK ROAD #301  
CITY-ST-ZIP CASSELBERRY FL 32718

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

TITLE S ☐ Delete  
NAME HOOVER, PAUL  
STREET ADDRESS 950 S. WINTER PARK ROAD #301  
CITY-ST-ZIP CASSELBERRY FL 32718

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

TITLE D ☐ Delete  
NAME HURST, EVA M  
STREET ADDRESS 950 S. WINTER PARK ROAD #301  
CITY-ST-ZIP CASSELBERRY FL 32718

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

TITLE D ☐ Delete  
NAME OLSEN, ANNE  
STREET ADDRESS 950 S. WINTER PARK ROAD #301  
CITY-ST-ZIP CASSELBERRY FL 32718

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

TITLE D ☐ Delete  
NAME SNYDER, ROBIN  
STREET ADDRESS 950 S. WINTER PARK ROAD #301  
CITY-ST-ZIP CASSELBERRY FL 32718

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HA Tico Perez, Ana 01/13/00 407 648-4007

Date

Daytime Phone #

CR2E037 (9/99)