

2000 UNIFORM BUSINESS REPORT (UBR)

1/2

FILED

May 03, 2000 8:00 am
Secretary of State

01-26-2000 90117 025 ****61.25

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1. Entity Name

THE IRWIN FOUNDATION, INC.

Principal Place of Business

C/O 5551 RIDGEWOOD DRIVE, SUITE 501
NAPLES FL 34108

Mailing Address

C/O 5551 RIDGEWOOD DRIVE, SUITE 501
NAPLES FL 34108

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0910636

Applied For

Not

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

CROWN, HOWARD L
C/O GRANT, FRIDKIN, PEARSON, ATHAN & CROWN
5551 RIDGEWOOD DRIVE, SUITE 501
NAPLES FL 34108

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

Howard L. Crown

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/17/00

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	D	☐ Delete
NAME	IRWIN, JAMES B	
STREET ADDRESS	25188 MARION AVE., VILLA 22-24	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	D	☐ Delete
NAME	IRWIN, LINDA S	
STREET ADDRESS	25188 MARION AVE., VILLA 22-24	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	D	☐ Delete
NAME	MCCAFFERTY, ROSE MARIE	
STREET ADDRESS	4552 MELBOURNE STREET	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	D	☐ Delete
NAME	O'TOOLE, KATHLEEN MARIE	
STREET ADDRESS	4530 MELBOURNE STREET	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	D	☐ Delete
NAME	ELIZABETH IRWIN, MARY	
STREET ADDRESS	31 SMITH STREET	
CITY-ST-ZIP	GLEN COVE NY 11542	
TITLE	D	☐ Delete
NAME	IRWIN, HARRY	
STREET ADDRESS	4520 NOLLWOOD	
CITY-ST-ZIP	PUNTA GORDA FL 33950	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Vice President/Director	☒ Change ☐ Addition
NAME	Irwin, Linda S.	
STREET ADDRESS	25188 Marion Ave., Villa 22-24	
CITY-ST-ZIP	Punta Gorda, FL 33950	
TITLE	President/Director	☒ Change ☐ Addition
NAME	McCafferty, Rose Marie	
STREET ADDRESS	4552 Melbourne Street	
CITY-ST-ZIP	Port Charlotte, FL 33980	
TITLE	Treasurer/Director	☐ Change ☐ Addition
NAME	O'Toole, Kathleen Marie	
STREET ADDRESS	4580 Melbourne Street	
CITY-ST-ZIP	Charlotte Acres, FL 33980	
TITLE	Asst. Secretary/Director	☐ Change ☐ Addition
NAME	Irwin, Mary Elizabeth	
STREET ADDRESS	31 Smith Street	
CITY-ST-ZIP	Glen Cove, NY 11542	
TITLE	Secretary/Director	☐ Change ☐ Addition
NAME	Irwin, Harry	
STREET ADDRESS	P.O. Box 512357	
CITY-ST-ZIP	Punta Gorda, FL 33951	

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:

Kathleen M. O'Toole

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KATHLEEN M. O'Toole

1/14/99

941 639 6677

Date

Daytime Phone #