

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000000011

1. Entity Name

THE WANVIG FOUNDATION, INC.

Principal Place of Business

326 BANYAN DRIVE
NOKOMIS FL 34275

Mailing Address

326 BANYAN DRIVE
NOKOMIS FL 34229-9243

2. Principal Place of Business

842 N. MAC EWE DRIVE

3. Mailing Address

Suite, Apt. #, etc.
842 N. MAC EWE DRIVE

City & State

OSPREY, FL.

Zip

34229

Country

U.S.A.

Zip

34229

Country

U.S.A.

6. Name and Address of Current Registered Agent

HINES, JAMES P
315 S HYDE PARK AVE
TAMPA FL 33606

4. FEI Number

65-0885129

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



7. Name and Address of New Registered Agent

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

TITLE D ☐ Delete
NAME WANVIG, WALTER L
STREET ADDRESS 326 BANYAN DRIVE
CITY-ST-ZIP NOKOMIS FL 34275

TITLE D ☐ Delete
NAME WANVIG, DONNA J
STREET ADDRESS 326 BANYAN DRIVE
CITY-ST-ZIP NOKOMIS FL 34275

TITLE D ☐ Delete
NAME WANVIG, STEPHEN W
STREET ADDRESS 326 BANYAN DRIVE
CITY-ST-ZIP NOKOMIS FL 34275

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME WANVIG, WALTER L.
STREET ADDRESS 842 N. MAC EWE DRIVE
CITY-ST-ZIP OSPREY, FL. 34229

TITLE ☐ Change ☐ Addition
NAME WANVIG, DONNA J
STREET ADDRESS 842 N. MAC EWE DRIVE
CITY-ST-ZIP OSPREY, FL. 34229

TITLE ☐ Change ☐ Addition
NAME WANVIG, STEPHEN W.
STREET ADDRESS 1880 ROLAND ST.
CITY-ST-ZIP SARASOTA, FL. 34231

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

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

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: Walter L. Wanyig WALTER L. WANVIG 3/22/00 941-488-6751

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)