

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000002334

1. Entity Name

FLORIDA SCHOOL BOARDS EDUCATIONAL LEADERSHIP FOUNDATION, INC.

Principal Place of Business

203 S. MONROE ST.
TALLAHASSEE FL 32301

Mailing Address

203 S. MONROE ST.
TALLAHASSEE FL 32301

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3570278

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

BLANTON, WAYNE DR.
203 S. MONROE ST.
TALLAHASSEE FL 32301

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 of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/23/02

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 PD
NAME GRAHAM, WILLIAM
STREET ADDRESS 1429 BETA COURT
CITY-ST-ZIP LAKE CLARKE SHORES FL 33406 ☐ Delete

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

TITLE D
NAME RILEY, PATRICIA
STREET ADDRESS 7002 SCARBORO DR. S.W.
CITY-ST-ZIP FT. MYERS FL 33919 ☐ Delete

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

TITLE D
NAME ADKINSON, SUSAN
STREET ADDRESS P.O. BOX 301
CITY-ST-ZIP DEFUNIAK SPRINGS FL 32433 ☐ Delete

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

TITLE TD
NAME SHARPE, BARBARA
STREET ADDRESS 1014 S.E. 10TH ST.
CITY-ST-ZIP GAINESVILLE FL 32601 ☐ Delete

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

TITLE D
NAME WHITELY, ANDREA
STREET ADDRESS 7726 CHASE RD.
CITY-ST-ZIP LAKELAND FL 33809 ☐ Delete

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

TITLE SD
NAME BLANTON, WAYNE
STREET ADDRESS 203 S. MONROE ST.
CITY-ST-ZIP TALLAHASSEE FL 32301 ☐ Delete

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

Date

Daytime Phone #

1/25/02

CR2E037 (9/01)