2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000006370

Entity Name: VICKI LYN ROBINSON FOUNDATION, INC.

FILED May 08, 2002 8:00 AM Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
401 E JACKSON STREET STE 2400 TAMPA, FL 33602				401 E JACKSON STREET 27TH FLOOR TAMPA, FL 33602		
Current Mailing Address:				New Mailing Address:		
401 E JACKSON STREET STE 2400 TAMPA, FL 33602				401 E JACKSON STREET 27TH FLOOR TAMPA, FL 33602		
FEI Number:	: 38-3425937	FEI Number Applied For ()	FEI Nur	mber Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:		Name and Address	of New Registered Agent:	
KLUG, CHARLES 401 E JACKSON STREET STE 2400 TAMPA, FL 33602				KLUG, CHARLES E 401 E JACKSON STREET 27TH FLOOR TAMPA, FL 33602		
	named entity of Florida.	submits this statement for the po	urpose c	of changing its registere	ed office or registered agent, or both,	
SIGNATURE: CHARLES E. KLUG					05/08/2002	
	Electro	nic Signature of Registered Age	nt		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ENGLERT, JA 3121 EGRET			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KLUG, ARTHÙ	ON STREET STE 2400		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KLUG, DONN	ON STREET STE 2400		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GARLOW, KA	ON STREET STE 2400		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KLUG, THOM	ON STREET STE 2400		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KLUG, KIRT D	ON STREET STE 2400		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWIN A. PHILIPS D 05/08/2002

CHARLES E. KLUG, JR. 401 E. JACKSON STREET 27TH FLOOR TAMPA, FLORIDA 33602

CARLTON HUFF 9416 FOREST HILLS CIRCLE TAMPA, FLORIDA 33612

BONNIE SMITH 237 ALADENA DRIVE SEFFNER, FLORIDA 33584

SUZANNE SCOTT 24549 LAUREL RIDGE DRIVE LUTZ, FLORIDA 33549

EDWIN A. PHILIPS 9041 BRELAND DRIVE TAMPA, FLORIDA 33626