

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 05, 2001 8:00 am
Secretary of State

06-05-2001 90029 015 *****61.25

DOCUMENT # N99000006806

1. Entity Name

THE WAYGOOD FOUNDATION, INC.

Principal Place of Business

4215 CALOOSA DR.
 PALMETTO FL 34221

Mailing Address

4215 CALOOSA DR.
 PALMETTO FL 34221

00057636



DO NOT WRITE IN THIS SPACE

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

65-0967452

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

WALSH, JOHN F JR
C/O WHITMAN BREED ABBOTT & MORGAN LLP
220 SUNRISE AVE.
PALM BEACH FL 33480

7. Name and Address of New Registered Agent

Name

Carolyn R. Waygood

Street Address (P.O. Box Number is Not Acceptable)

4215 Caloosa Drive

City

Palmetto

FL

Zip Code

34221

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.

(NOT: Registered Agent's 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 **P** ☐ Delete
 NAME **WAYGOOD, CAROLYN R**
 STREET ADDRESS **4215 CALOOSA DR.**
 CITY-ST-ZIP **PALMETTO FL 34221**

TITLE **VPT** ☐ Delete
 NAME **HIERRAK, ROBERT J**
 STREET ADDRESS **4215 CALOOSA DR.**
 CITY-ST-ZIP **PALMETTO FL 34221**

TITLE **S** ☐ Delete
 NAME **WAYGOOD, CHARLES M**
 STREET ADDRESS **11620 5TH ST. E.**
 CITY-ST-ZIP **TREASURE ISLAND FL 33706**

TITLE **D** ☐ Delete
 NAME **WAYGOOD, JAMES J II**
 STREET ADDRESS **3725 OAK ST. NE**
 CITY-ST-ZIP **SAINT PETERSBURG FL 33704**

TITLE **D** ☐ Delete
 NAME **BORHO, CONSTANCE W**
 STREET ADDRESS **774 PLEASANTVILLE RD**
 CITY-ST-ZIP **BRIARCLIFF MANOR NY 10510**

TITLE **D** ☐ Delete
 NAME **WAYGOOD, CHUCK JR**
 STREET ADDRESS **10901 GALERIA COVE**
 CITY-ST-ZIP **AUSTIN TX 78759**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **4311 Caloosa Drive**
 CITY-ST-ZIP **Palmetto, Florida 34221**

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; 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:

Carolyn R. Waygood

5/24/01 941-729-9751

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)