2002 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 19, 2002 8:00 am Secretary of State DOCUMENT # N9900006806 1. Entity Name THE WAYGOOD FOUNDATION, INC. 02-19-2002 90037 042 ****61.25 Principal Place of Business Mailing Address 4215 CALOOSA DR. 4215 CALOOSA DR. PALMETTO FL 34221 PALMETTO FL 34221 ~ m a # A 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0967452 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) WAYGOOD, CAROLYN R 4215 CALOOSA DRIVE PALMETTO FL 34221 City 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. (NOTF: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Director TITLE ☐ Delete Addition | TITLE Carole B. Waygood WAYGOOD, CAROLYN R NAME 4215 CALOOSA DR. STREET ADDRESS STREET ADDRESS 33706 CITY-ST-ZIP PALMETTO FL 34221 CITY-ST-ZIP ☐ Delete TITLE Change Addition HIERRAK, ROBERT J NAME 4215 CALOOSA DR. STREET ADDRESS STREET ADDRESS PALMETTO FL 34221 CITY-ST-ZIP CITY-ST-ZIP [] Change TITLE ☐ Delete TITLE ☐ Addition WAYGOOD, CHARLES M NAME NAME STREET ADDRESS 11620 5TH ST. E. STREET ADDRESS CITY-ST-ZIP Treasure Island FL 33706 CITY-ST-7IP Delete TITLE TITLE [Change Addition Waygood, James J II NAME 4311 CALOOSA DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALMETTO FL 34221 CITY-ST-ZIP ☐ Delete ☐ Addition TITLE BORHO, CONSTANCE W 774 PLEASANTVILLE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRIARCLIFF MANOR NY 10510 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition WAYGOOD, CHUCK JR NAME 10901 GALERIA COVE STREET ADDRESS STREET ADDRESS **AUSTIN TX 78759** CITY-ST-ZIP 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 exprowered.

JIRICAROUN R WAYGOOD

SIGNATURE: