

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000007007

1. Entity Name

THE GARY CARTER FOUNDATION, INC.

Principal Place of Business

~~2134 CHAGALL CIRCLE
WEST PALM BEACH FL 33409~~

Mailing Address

~~2134 CHAGALL CIRCLE
WEST PALM BEACH FL 33409~~

2. Principal Place of Business

560 Village Blvd

Suite, Apt. #, etc.

Suite 260

City & State

West Palm Beach Florida

Zip

33409

Country

USA

3. Mailing Address

560 Village Blvd

Suite, Apt. #, etc.

Suite 260

City & State

West Palm Beach Florida

Zip

33409

Country

USA

6. Name and Address of Current Registered Agent

~~FHS CORPORATE SERVICES, INC.
11780 U.S. HWY ONE, SUITE 300
NORTH PALM BEACH FL 33408~~

7. Name and Address of New Registered Agent

Name

(None)

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

Gay E. Carter

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/25/01
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 CARTER, GARY E
STREET ADDRESS 15 HUNTLEY DRIVE
CITY-ST-ZIP PALM BEACH GRDNS FL 33418

TITLE D ☐ Delete
NAME CARTER, SANDRA K
STREET ADDRESS 5 HUNTLEY DRIVE
CITY-ST-ZIP PALM BEACH GRDNS FL 33418

TITLE D ☐ Delete
NAME PETERSEN, SUSAN L
STREET ADDRESS 1645 PALM BEACH LAKES BLVD.
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE D ☐ Delete
NAME NOLAN, THOMAS M
STREET ADDRESS 2134 CHAGALL CIRCLE
CITY-ST-ZIP WEST PALM BEACH FL 33409

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 PD ☒ Change ☐ Addition
NAME
STREET ADDRESS 15 Huntly Drive
CITY-ST-ZIP

TITLE VD ☒ Change ☐ Addition
NAME
STREET ADDRESS 15 Huntly Drive
CITY-ST-ZIP

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

TITLE TD ☒ 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:

Gay E. Carter REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/01

Date

(561) 686-3488

Daytime Phone #

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90099 005 *****61.25



DO NOT WRITE IN THIS SPACE

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