## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

## **FILED** DOCUMENT # N99000007223 Apr 07, 2000 8:00 am Secretary of State THE RITA FOUNDATION, INC. 04-07-2000 90066 009 \*\*\*\*61.25 Principal Place of Business Mailing Address 8334 AMHERST HILLS LANE 8334 AMHERST HILLS LANE JACKSONVILLE FL 32256 JACKSONVILLE FL 32256 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc 4. FEI Number Applied For City & State City & State 59-36142 Not Applicable \$8.75 Additional Country Zlp Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name\_ . \_ -- - - -Street Address (P.O. Box Number is Not Acceptable) ALLEN, GLENN K 353 E. FORSYTH ST. JACKSONVILLE FL 32202 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing FILE NOW: **\$5.00** May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition TITLE ☐ Change ☐ Delete TITLE JANTZ, CHARLES R NAME NAME STREET ADDRESS STREET ADDRESS 8334 AMHERST HILLS LANE CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32256 ☐ Change ☐ Addition ☐ Delete TITLE TITLE JANTZ, NANCY J NAME 8334 AMHERST HILLS LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32256 Change Addition ☐ Delete TITLE NAME KING, JOHN NAME STREET ADDRESS STREET ADDRESS 7819 MCLAURIN RD. NORTH CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32256 Change Addition ☐ Delete TITLE TITLE NAME AZZARELLO, KATHY NAME STREET ADDRESS STREET ADDRESS 7938 BISHOP LAKE RD. CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32256 ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME BRADDOCK, ROBIN STREET ADDRESS STREET ADDRESS 10043 CHESTER LAKE RD. E. CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32256 Change Addition ☐ Delete TITLE TITLE NAME HARTLEY, MIKE NAME STREET ADDRESS STREET ADDRESS 8728 PERSIMMON HILL LANE CITY-ST-7IP CITY-ST-ZIP JACKSONVILLE FL 32256 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

差QUCHTGles R. Jant