

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 91000 015 ****61.25

DOCUMENT # N97000002254

1. Entity Name

THE GARDNER FAMILY FOUNDATION, INC.

Principal Place of Business

Mailing Address

C/O CLAIR GARDNER
 108A NW 7TH ST.
 GAINESVILLE FL 32601

C/O CLAIR GARDNER
 108A NW 7TH ST.
 GAINESVILLE FL 32601

2. Principal Place of Business

C/O H. G. PRALL

3. Mailing Address

C/O H. G. PRALL

Suite, Apt. #, etc.

4003 CATTAIL POND DR

Suite, Apt. #, etc.

4003 CATTAIL POND DR

City & State

JACKSONVILLE, FL

City & State

JACKSONVILLE, FL

4. FEI Number

65-0748998

Applied For

Not Applicable

Zip

32224

Country

DUVAL

Zip

32224

Country

DUVAL

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GARDNER, CLAIRE
 321 SE 3RD ST
 APT & FL
 GAINESVILLE FL 32601

7. Name and Address of New Registered Agent

Name **HORACE G. PRALL**
 Street Address (P.O. Box Number is Not Acceptable)
4003 CATTAIL POND DR
 City **JACKSONVILLE** FL Zip Code **32224**

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 **HORACE G. PRALL**

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

(Not Registered Agent signature required when reinstating)

DATE

APRIL 19, 2001

**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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	GARDNER, DONALD J	3319 ANDERSON ROAD	CORAL GABLES FL 33134	<input type="checkbox"/>
TSD	GARDNER, KATHLEEN S	3319 ANDERSON ROAD	CORAL GABLES FL 33134	<input type="checkbox"/>
D	GARDNER, CLAIRE E	3319 ANDERSON ROAD	CORAL GABLES FL 33134	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		17 SUNDEW RD	SAVANNAH, GA 31411	<input type="checkbox"/>	<input type="checkbox"/>
		17 SUNDEW RD	SAVANNAH, GA 31411	<input type="checkbox"/>	<input type="checkbox"/>
		108A NW 7TH ST	GAINESVILLE, FL 32601	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/01

912-598-2893

Date

Daytime Phone #

CR2E037 (10/00)