

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2001 8:00 am
Secretary of State

03-13-2001 90075 027 ****61.25

DOCUMENT # 703211

1. Entity Name

ACT, CORP.

Principal Place of Business

**1220 WILLIS AVE
 DAYTONA BEACH FL 32114-2810**

Mailing Address

**1220 WILLIS AVE
 DAYTONA BEACH FL 32114-2810**

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

59-0976866

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**COBLE, KERMIT J.
 511 NORTH OLEANDER AVENUE
 DAYTONA BEACH FL 32014**

7. Name and Address of New Registered Agent

Name

SIMPSON, SCOTT ESO.

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

1020 W. INT'L SPEEDWAY BLVD

City

DAYTONA BEACH

FL

Zip Code
32114

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

Scott E. Simpson

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/7/01

**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	DUNN, LUCKEY M.D.	
STREET ADDRESS	155 S HALIFAX AVE	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	D	☒ Delete
NAME	SESSION, WILLIE MAE	
STREET ADDRESS	1108 LAKEWOOD PARK DR	
CITY-ST-ZIP	DAYTONA BCH FL 32117	
TITLE	P	☒ Delete
NAME	LAROSA, PETER	
STREET ADDRESS	1825 WHIPPOORWILL LANE	
CITY-ST-ZIP	DELAND FL	
TITLE	VD	☐ Delete
NAME	CHAPPELLE, LOIS	
STREET ADDRESS	65 CROOKED PINE ROAD	
CITY-ST-ZIP	PORT ORANGE FL 32124	
TITLE	D	☐ Delete
NAME	BENEDICT, JOSEPH	
STREET ADDRESS	P.O. BOX 10809	
CITY-ST-ZIP	DAYTONA BEACH FL 32120	
TITLE	D	☒ Delete
NAME	KELLY, THOMAS	
STREET ADDRESS	89 S ATLANTIC AVE #1004	
CITY-ST-ZIP	ORMOND BEACH FL 32176	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	BOARD CHAIR	☒ Change ☐ Addition
NAME	CHAPPELLE, LOIS	
STREET ADDRESS	65 CROOKED PINE RD.	
CITY-ST-ZIP	PORT ORANGE, FL 32124	
TITLE	VICE CHAIR	☒ Change ☐ Addition
NAME	BENEDICT, JOSEPH	
STREET ADDRESS	PO BOX 10809	
CITY-ST-ZIP	DAYTONA BEACH, FL 32120	
TITLE	P&F CHAIR	☒ Change ☐ Addition
NAME	KELLY, THOMAS	
STREET ADDRESS	89 S. ATLANTIC AVE, #1004	
CITY-ST-ZIP	ORMOND BEACH, FL 32176	
TITLE	PAST CHAIR	☒ Change ☐ Addition
NAME	LAROSA, PETE	
STREET ADDRESS	1825 WHIPPOORWILL LANE	
CITY-ST-ZIP	DELAND, FL 32720	
TITLE	MEMBER-AT-LARGE	☐ Change ☒ Addition
NAME	DIXON, JACK	
STREET ADDRESS	269 WESTHAMPTON DR	
CITY-ST-ZIP	PALM COAST, FL 32164	
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: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Lois Chappelle

CR2E037 (10/00)

#703211
729624

2000 BOARD OF DIRECTORS

NAME/ADDRESS	PHONE	OCCUPATION	TERM EXPIRES
Dr. Thomas Kelly 89 S. Atlantic Ave, #1004 Ormond Beach, FL 32176	904-672-3042 (h)	Retired	March 2004
Mr. Pete LaRosa Past Chair 1825 Whippoorwill Lane, DeLand, FL 32720	904-734-9350 (h)	Retired	April 2005
Mr. Jeff Portman 2658 Flowing Well Road DeLand, FL 32720	904-736-9411(w) 904-736-6888(h)	President- USI, Inc.	April 2003
Ms. Cheryl Rosenberg P.O. Box 291171 Port Orange, FL 32129-1171	904-788-1111(w) 904-304-2904(h) 904-334-4309 (c)	Pastor	September 2008
Ms. Willie Mae Session 1108 Lakewood Park Drive Daytona Beach, FL 32117	904-323-2026 904-258-7915(fx) 904-255-1011(h)	Assistant Professor	March 2001
Mr. Daniel R. Vaughn P.O. Box 364 DeLand, FL 32721	904-734-8914 (w)(h)	Attorney/Teacher (UCF)	October 2007
Ms. Diane Zeidwig 145 W. Wisconsin Avenue DeLand, FL 32720	904-736-4722 (w) 904-736-3798 (h)	Psychotherapist	October 2007

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2000 BOARD OF DIRECTORS

NAME/ADDRESS	PHONE	OCCUPATION	TERM EXPIRES
Mr. Joseph Benedict Vice Chair P.O. Box 10809 Daytona Beach, FL 32120	904-255-7558(w) 904-239-0555(fx) 904-428-6505(h)	Government Relations	April 2004
Ms. Lois Chappelle Chair 65 Crooked Pine road Port Orange, FL 32124	904-767-0470(h) (904) 760-4525(f)	Retired	March 2001
Ms. Cheryl C. Crane PO Box 5176 Ormond Beach, FL 32175-5176	904-673-0979(w) 904-677-1864(h) (904) 672-7250(f)	Design & Estimation	April 2007
Dr. Jack Dixon Member-at-Large 269 Westhampton Drive Palm Coast, FL 32164	904-255-8131 x3690 (w) 904-446-0328(h)	Education Consultant	May 2004
Luckey Dunn, M.D. 155 S. Halifax Ave. Daytona Beach, FL 32118	904-252-7119(w) 904-253-5518(fx) 904-248-2087(h)	Physician	September 2001
Mr. Leslie Elder P.O. Box 353527 Palm Coast, FL 32135	904-446-5484	Retired Professor / Administrator	April 2008
Mr. Jim R. Foster c/o Halifax-Fish Community Health 1041 Dunlawton Avenue, Suite 250 Port Orange, FL 32119	904-322-4769 (w) 904-426-6215 (h) (904) 322-4768(f)	Healthcare Executive	December 2006