

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 04, 2001 8:00 am**  
**Secretary of State**

0011107

04-04-2001 90015 040 \*\*\*\*61.25

**DOCUMENT # 726067**

1. Entity Name  
**PASTORAL COUNSELING SERVICES, INC.**

Principal Place of Business 2140 MANGO PLACE JACKSONVILLE FL 32207	Mailing Address 2140 MANGO PLACE JACKSONVILLE FL 32207
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number <b>59-1515557</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**RUTLAND-WALLIS, JOHN**  
**2140 MANGO PLACE**  
**JACKSONVILLE FL 32207**

7. Name and Address of New Registered Agent

Name  
**Susan M. Martinez**

Street Address (P.O. Box Number is Not Acceptable)  
**2140 Mango Place**

City  
**Jacksonville** **FL** Zip Code  
**32207**

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 **4/2/01**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW: FEE IS \$61.25</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Department of State</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME P <b>LOTHMAN, LOUIS</b>	<input type="checkbox"/> Delete
STREET ADDRESS <b>2140 MANGO PL</b>	
CITY-ST-ZIP <b>JACKSONVILLE FL 32207</b>	
TITLE NAME V <b>RUTLAND-WALLIS, JOHN</b>	<input checked="" type="checkbox"/> Delete
STREET ADDRESS <b>2140 MANGO PL</b>	
CITY-ST-ZIP <b>JACKSONVILLE FL 32207</b>	
TITLE NAME D <b>CHIPPERFIELD, ALAN</b>	<input checked="" type="checkbox"/> Delete
STREET ADDRESS <b>25 N. MARKET ST., #200</b>	
CITY-ST-ZIP <b>JACKSONVILLE FL 32202</b>	
TITLE NAME D <b>COFER, CHARLES</b>	<input type="checkbox"/> Delete
STREET ADDRESS <b>1147 GREENRIDGE ROAD</b>	
CITY-ST-ZIP <b>JACKSONVILLE FL 32207</b>	
TITLE NAME T <b>VERNER, DAVID</b>	<input checked="" type="checkbox"/> Delete
STREET ADDRESS <b>2140 MANGO PL</b>	
CITY-ST-ZIP <b>JACKSONVILLE FL 32207</b>	
TITLE NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME V <b>Martinez, Susan M.</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS <b>2140 Mango Place</b>	
CITY-ST-ZIP <b>Jacksonville, FL 32207</b>	
TITLE NAME D <b>Lorey, Sally</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS <b>849 Park St.</b>	
CITY-ST-ZIP <b>Jacksonville, FL 32204</b>	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME T <b>Darby, Verna</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS <b>2140 Mango Place</b>	
CITY-ST-ZIP <b>Jacksonville, FL 32207</b>	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: **3/31/01** **LOUIS R. LOTHMAN**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)