

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90684 021 ****61.25

DOCUMENT # 756386

1. Entity Name

ELECTROLYSIS SOCIETY OF FLORIDA, INC.



Principal Place of Business

**4550 PALMETTO AVE
STE 102
WINTER PARK FL 32792
US**

Mailing Address

**4550 PALMETTO AVE
STE 102
WINTER PARK FL 32792
US**

70008173



CHECK HERE IF MAKING CHANGES

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 **59-2184313**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SCOTT, HILDEGARD
4550 PALMETTO AVE
STE 102
WINTER PARK FL 32792**

Name

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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 Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
P	HUDSON, GINGER	3616 ST JOHNS AVE	JACKSONVILLE FL 32205	<input checked="" type="checkbox"/>
DV2V	FARELLA, LUCILLE	209 COUNTRY CLUB RD	LAKE MARY FL 32746	<input checked="" type="checkbox"/>
SD	WILLIAMSON, MICHELE	800 PAUL ST STE B	ORLANDO FL 32808	<input checked="" type="checkbox"/>
T	SCOTT, HILDEGARD	4550 PALMETTO AVE STE 102	WINTER PARK FL 32792	<input type="checkbox"/>
VP	MC ALLISTER, STEPHANIE	312 SOUTH OLD DIXIE HWY #205	JUPITER FL 33458	<input type="checkbox"/>
D	ADAMS, JUDY	651 AIA BEAR BLVD	SAINT AUGUSTINE FL 32084	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
President	Owens, Shelby	213 East Brent	Pensacola, Fl. 32503-2204	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
DV	Brassington, Jessica	5200 W. Newberry Rd. Suite D 5	Gainesville, Fl. 32607	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Williamson, Michele	800 Paul St Ste B	Orlando, Fl. 32808	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<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: *SIG. HILDEGARD SCOTT* HILDEGARD SCOTT 1-8-03 407-657-6006

CR2E037 (10/02)