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

FILED
Feb 11, 2003 8:00 am
Secretary of State
02-11-2003 90064 028 ****61.25

DOCUMENT # 760230

1. Entity Name

FLORIDA ASSOCIATION FOR COMMUNITY ACTION, INC. (FACA)

Principal Place of Business	Mailing Address
6212 NW 43RD ST. SUITE A GAINESVILLE FL 32653-8860 US	6212 NW 43RD ST SUITE A GAINESVILLE FL 32653-8860 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
207 W. Park Ave	207 W. Park Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tallahassee, FL	City & State: Tallahassee, FL
Zip: 32301 Country: US	Zip: 32301 Country: US

4. FEI Number 59-2929791 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

~~PATSY, BELL THOMAS P.D.~~
~~6212 NW 43RD ST --~~
~~SUITE A ------~~
~~GAINESVILLE FL 32653-8860~~

Patty Ball Thomas, Ph.D.
207 West Park Avenue
Tallahassee, FL 32301

7. Name and Address of New Registered Agent

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 _____ DATE

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

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	PD BROWN-LAWSON, OPHELIA 395 NW 1ST ST., STE 101 MIAMI FL 33128	☒ Delete	VPD Atkins, William 395 NW 1st. Street, Suite 101 ~~Miami, FL 33128-1698~~	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD EDWARDS, JOHN W. JR. 411 WEST ADAMS ST, STE 200 JACKSONVILLE FL 33881	☐ Delete	PD 421 West Church Street, Suite 705 Jacksonville, FL 32204	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BROWN-MARTILIK, MARY 241 TRUMBO ROAD KEY WEST FL 33040-6684	☒ Delete	SD JOhnson, Deloris 7301 Lynchburg Road Winter Haven, FL 33881	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD GRAY, IVORY 336 S. MAIN ST WILDWOOD FL 34785	☒ Delete	TD Fryer, Artie 505 East Jackson Street Suite 204 Tampa, FL 33602	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THOMAS, PATTY BALL 6212 NW 43RD ST., STE. A GAINESVILLE FL 32653-8860	☐ Delete	 207 W. Park Avenue Tallahassee, FL 32301	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (10/02)

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: Patty Ball Thomas FILED 2/07/03 (850)224-4774

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #