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

Mailing Address

1991 S. APOPKA BLVD

ORLANDO FL 32703

LIS

DOCUMENT # 767398

Principal Place of Business

1991 S. APOPKA BLVD ORLANDO FL 32703

LIS

SPECIALIZED TREATMENT, EDUCATION AND PREVENTION SERVICES, INC.



Secretary of State 01-31-2003 90114 022 ****61.25

FILED

Jan 31, 2003 8:00 am

DUNTION



2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 63-0836930 Not Applicable Zip Country____ Zip_ \$8.75 Additional •5. Certificate of Status Desired 🦈 🗔 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TURNER, KATHLEEN Street Address (P.O. Box Number is Not Acceptable) 2917 N PINE HILLS RD Pine. ORLANDO FL 32808 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 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. CD Change ☐ Delete TITLE TITLE Jones, Eric JONES, ERIC NAME NAME 2230 N. Piper Lane, Stetla 1720 JONES ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP mountain, UT. 84043 CITY-ST-ZIP MELBOURNE FL 32901 TITLE ☐ Delete TITLE ROYALS, ED JR NAME NAME 6903 OAKMORE LANE ---STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32792 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITI F BERRY, RAY NAME NAME STREET ADDRESS 2107 N. 14TH AVE STREET ADDRESS HOLLYWOOD FL 33020 CITY-ST-ZIP CITY-ST-7IP Delete TITLE Change Addition TITLE BURKETT, CAROL NAME NAME 130 W. Kaley 1382 LANDRY STREET ADDRESS STREET ADDRESS CITY-ST-7IP Orlandosfi CITY-ST-ZIP LONGWOOD FL 32750 ☐ Delete TITLE Change Addition REGAN, JOSEPH NAME NAME STREET ADDRESS 1098 HUNT STREET N.W. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM BAY FL 32907 **Change** Delete ☐ Addition TITLE TITLE MCGARRY, NEAL NAME STREET ADDRESS 1715 S. GADSEN STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32301

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 REQUIR