

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90002 009 ****61.25

DOCUMENT # 770757

1. Entity Name
INTERFAITH EMERGENCY SERVICES, INC.

Principal Place of Business 435 NW 2 ST OCALA FL 34475 US	Mailing Address PO BOX 992 OCALA FL 34478-0992 US
2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2349840		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent
MATHIS, CHARLES 4250 N.E. 90TH ST ANTHONY FL 32617		Name Judy Chambers Street Address (P.O. Box Number is Not Acceptable) 14350 SE 108th Terr City Summerfield, FL 34491 FL Zip Code 34491

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 Judy Chambers **Judy Chamber** **4/10/00**
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. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MATHIS, CHARLES P O BOX 1214 ANTHONY FL 32617 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Daniel R Jones 944 NE 19th St Ocala FL 34470
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AKIN, VAN I 615 E SILVER SPINGS BLVD OCALA FL 34470 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Carol Earton 128 NE 37th Terr Ocala FL 34470
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, SALLY 1520 SE 5TH ST OCALA FL 34471 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Van Akin II 615 E Silver Springs Blvd Ocala FL 34470
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, DANIEL R 944 NE 19TH ST OCALA FL 34470 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input type="checkbox"/> Addition Janet Gemm, II 3788 SE 45th Pl Ocala FL 34480
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRISTOW, BASIL 75 SE 123RD ST RD OCALA FL 34480 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input type="checkbox"/> Addition Ella Hart 2707 NW 3rd Ave Ocala FL 34475
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALTENBERGER, KARL 1800 SE 17TH ST OCALA FL 34471 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input type="checkbox"/> Addition Bruce Gaultney 5063 SE 37th Ave Ocala FL 34480

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 **4-10-00** **352-629-8368**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)

1/13/2000

Board List

Title	Last Name	First Name	Address	City	State	ZIP	Home Phone	Office Phone
Vice President	Akin II	Van	615 E Silver Springs Blvd	Ocala	FL	34470	624-0098	732-3344
	Arnett	John	1371 SW 43rd Pl	Ocala	FL	34474-8901	873-8463	622-1188
	Brandon	Charles	1311 NE 12th Ave	Ocala	FL	34470	622-4059	
	Chambers	Judy	14350 SE 108th Terr	Summerfield	FL	34491-3780	288-6172	
Secretary	Eurton	Carol	128 NE 37th Terr	Ocala	FL	34470	694-4634	
	Foy	Linda	2301 SE 5th St	Ocala	FL	34471-2614	840-0368	629-0055
	Gaultney	Bruce	5063 SE 37th Ave	Ocala	FL	34480	867-5726	867-4100
	Gemmill	Janet	3788 SE 45th Pl	Ocala	FL	34480	368-2611	
	Grayson	Jack	5220 NW 76th Ct	Ocala	FL	34482	629-3217	622-3846
	Harris	Michael	5730 SE 28th St	Ocala	FL	34471	624-0066	
	Hart	Ella	2707 NW 3rd Ave	Ocala	FL	34475	351-3601	629-8540
	Heubeck	George	1974 NE 7th St	Ocala	FL	34470	629-2997	
President	Jones	Daniel R	944 NE 19th St	Ocala	FL	34470	732-3982	622-4475
	Patterson	Henry	1701 SE 24th Rd, #1602	Ocala	FL	34471-6064	622-5729	
	Steele	Jerry W	P O Box 1048	Anthony	FL	32617-1048	629-6842	622-3780
	Stevens	Don	1051 SE 52nd Ct	Ocala	FL	34471-5017	694-5287	237-4422
	Stevenson	Marianne	746 Bahia Cir	Ocala	FL	34472	680-0202	
	Williams	Sally	1520 SE 5th St	Ocala	FL	34471-2404	629-2418	

attach.
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