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

FILED
Jan 15, 2003 8:00 am
Secretary of State
01-15-2003 90275 003 ****61.25

DOCUMENT # N09520

1. Entity Name

NAMI/LAKE/SUMTER/FLORIDA ALLIANCE FOR THE MENTAL LY ILL, INC.

Principal Place of Business	Mailing Address
LIFE STREAM BEHAVIORAL 2020 TALLY RD LEESBURG FL 34748 US	PO BOX 493241 LEESBURG FL 34749-0241

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
LIFESTREAM ACADEMY	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2566527 ☐ 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
WALLS, BONNIE G 151 ORANGE BLOSSOM LANE LEESBURG FL 34748	Name MARGARET NICHOLSON Street Address (P.O. Box Number is Not Acceptable) 6201 TOPSAIL RD. City LADY LAKE FL Zip Code 32159

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 Margaret Nicholson, Pres. 1/13/03
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	VDSD HEDGECOOK, CLAIRE 5445 E HARBOR DRIVE FRUITLAND PARK FL 34731-6009	☐ Delete	PD NICHOLSON, MARGARET 6201 TOPSAIL RD. LADY LAKE, FL 32159	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD NICHOLSON, MARGARET 6201 TOPSAIL RD. FRUITLAND PARK FL 34731-6009	☐ Delete	VD HEDGCOCK, CLAIRE 5445 E. HARBOR DR. FRUITLAND PARK, FL. 34731-6009	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WALLS, BONNIE G 151 ORANGE BLOSSOM LANE LEESBURG FL 34748	☑ Delete	TD KATONIA DIGGS 34042 MEADOW LANE LEESBUAG, FL. 34788	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	SD DODIE WILLIS 1003 N. VALENCIA AVE. HOWEY IN THE HILLS, FL. 34743	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ 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: Margaret Nicholson 1/13/03 352-259-2789
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR