


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

**FILED**  
**Mar 25, 2003 8:00 am**  
**Secretary of State**

03-25-2003 90078 008 \*\*\*\*70.00

**DOCUMENT # N13984**

1. Entity Name  
**ASLAN HOUSE, INC.**



Principal Place of Business  
**4311 MELROSE AVE  
JACKSONVILLE FL 32205  
US**


Mailing Address  
**P.O. BOX 52116  
JACKSONVILLE FL 32201  
US**

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

Zip Country Zip Country



CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2662845** Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**HINSON, PAULA ANNE  
1626 GERALDINE DRIVE  
JACKSONVILLE FL 32205**

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 *Paula Anne Hinson* DATE *3/21/2003*

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DAY, JOANNE REED 7077 BONNEVAL ROAD JACKSONVILLE FL 32205 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JOHNSON, GREGORY 7077 BONNEVAL ROAD, #202 JACKSONVILLE FL 32216 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ALTERMAN, LEONARD 9116 CYPRESS GREEN DR. JACKSONVILLE FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, MARLENE 1544 CHELSEA AVE. ORANGE PARK FL 32073 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HINSON, PAULA 1626 GERALDINE DRIVE JACKSONVILLE FL 32205 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Elizabeth Devereux PO Box 2465 Crested Butte Colorado 81224 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT Reed, Joanne 1600 US Highway 64 West Box 203 Sopchopko, N.C. 28774 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Johnson, Gregory 4735 Sunbeam Rd JAX. FL. 32257 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Leonard Alterman 9116 Cypress Green Drive JAX. FL. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT Hinson Paula 1626 Geraldine Drive JAX. FL. 32205 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Paula Anne Hinson* SIGNATURE REQUIRED *3/21/03* 904 388-8133

CR2E037 (10/02)

Attachment 80062327  
N13984

**Aslan House, Inc.**  
P.O. Box 52116  
Jacksonville, FL 32201-2116

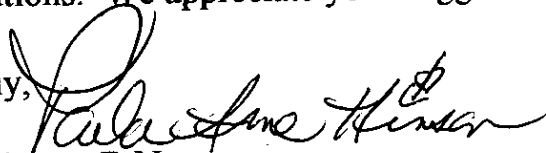
Florida Department of State  
Attn: Laura S.  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Regarding the 2003 Uniform Business Report for Aslan House.

Dear Laura,

After speaking with you on the phone, you were such a great help. I have decided to file the uniform business report for 2003 to maintain our 510c3 status although we are not currently providing any services. Without paying the \$70.00 to file, reinstatement charges of \$400 will apply in 2004 if possible medically to become active again. We are listed as N13984 Aslan House, Inc.; P.O. Box 52116; Jacksonville, FL 32201-2116. Your referral to Eula at the Division of Corporations has advised me to handle it in this manner (850) 245-6059. She stated that the Division of Corporation is concerned with basically officers and directors, not business activities or contributions. We appreciate your suggestions and support.

Sincerely,



Paula Hinson, R.N.

Founder and Director of Aslan House, Inc.