2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State
04-11-2002 90088 015 ****61.25

0052890

DOCUMENT # N15759

1. Entity Name

JEWISH FAMILY AND CHILDREN'S SERVICE OF SARASOTA -MANATEE, INCORPORATED

Principal Place of Business	Mailing Address
2688 FRUITVILLE RD SARASOTA FL 34237 US	2688 FRUITVILLE RD SARASOTA FL 34237 US

DO NOT WRITE IN THIS SPACE

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

4. FEI Number 59-2693318 ☐ 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
WIESNER, IRA 1800 2ND ST STE 870 SARASOTA FL 34236	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.

SIGNATURE _____
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 Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ROBINSON, ADAM 4641 GLEN BROOKE TERRACE SARASOTA FL 34243	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition Charlotte Graver. 3040 Grand Bay Blvd.Apt. 243 Longboat Key FL 34228
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LEUCHTER, LISA 3705 62ND ST E BRADENTON FL 34208	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD KOMMET, EVE 670 OLD COMPASS RD LONGBOAT KEY FL 34228	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition Charles Ackerman 4903 Peregrine Pt. Way Sarasota FL 34231
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP GILLMAN, STACEY 1743 INDEPENDENCE BLVD D-3 SARASOTA FL 34234	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition Barbara Brizdle 415 L'Ambiance Drive Longboat Key FL 34228
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M CHAPMAN, ROSE 5624 BOULDER BLVD. SARASOTA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/01)

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