

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N25926

1. Entity Name

FLORIDA STARS FOR FLORIDA BABIES, INC.

FILED
Aug 30, 2000 8:00 am
Secretary of State

08-30-2000 90004 010 ****61.25

Principal Place of Business

Mailing Address

1310 CROSS CREEK CIR #A
TALLAHASSEE FL 32301
US

1310 CROSS CREEK CIR #A
TALLAHASSEE FL 32308-2285
US

2. Principal Place of Business

3. Mailing Address

4500 W. Shannon Lakes

4500 W. Shannon Lakes

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Unit 1, #198

Unit 1, Suite 198

City & State

City & State

Tallahassee, FL

Tallahassee, FL

Zip

Country

Zip

Country

32308

USA

32308

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MORTON, KAYCE
1310 CROSS CREEK CIR #A
TALLAHASSEE FL 32301

Name

Linda Contreras

Street Address (P.O. Box Number is Not Acceptable)

4037 Devlin Ct

City

Tallahassee

FL

Zip Code

32308

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

Linda K. Contreras

8-28-00

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. ☐

\$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 ☐ Delete
NAME POWERS, KATIE
STREET ADDRESS 108-25TH STREET, WEST
CITY-ST-ZIP BRADENTON FL 34205

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME COHN, CATHY
STREET ADDRESS 211 S. FEDERAL HIGHWAY, #15
CITY-ST-ZIP BOYNTON BEACH FL 34205

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME KAYCE MORTON
STREET ADDRESS 1310 CROSS CREEK CIR #A
CITY-ST-ZIP TALLAHASSEE FL 32301

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME NORTON DAVIS, SUZANNE
STREET ADDRESS 6231 DRAKE STREET
CITY-ST-ZIP PALM BEACH GARDENS FL 33418

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Linda Contreras
STREET ADDRESS 4037 Devlin Ct
CITY-ST-ZIP Tallahassee, FL 32308

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Linda K. Contreras

8-28-00

850-245-4465

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)