

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

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90130 010 ****70.00

DOCUMENT # N33353

1. Entity Name
CITIZENS COMMISSION ON HUMAN RIGHTS OF FLORIDA, INC.



Principal Place of Business

**305 N FORT HARRISON AVE
CLEARWATER FL 33755
US**

Mailing Address

**305 N FORT HARRISON AVE
CLEARWATER FL 33755
US**

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 **59-2973520**

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

**ARGALL, MATT
305 N. FORT HARRISON AVENUE
CLEARWATER FL 33755**

Name **Mary DeMoss**

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

305 N. Fort Harrison Ave

City **Clearwater**

FL

Zip Code **33755**

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

Mary DeMoss
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

April 11, 2003

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 **DP** ☒ Delete
NAME **ARGALL, MATT**
STREET ADDRESS **5 BIRDIE LANE**
CITY-ST-ZIP **PALM HARBOR FL 34683**

TITLE **SD** ☐ Change ☒ Addition
NAME **Mary DeMoss**
STREET ADDRESS **315 Edgewood Ave**
CITY-ST-ZIP **Clearwater, FL 33755**

TITLE **TD** ☒ Delete
NAME **BERNAL, MARIA**
STREET ADDRESS **2321 STAG RUN BLVD.**
CITY-ST-ZIP **CLEARWATER FL 33765**

TITLE **TD** ☐ Change ☒ Addition
NAME **Elizabeth Adams**
STREET ADDRESS **315 Edgewood Ave**
CITY-ST-ZIP **Clearwater, FL 33755**

TITLE **SD** ☒ Delete
NAME **VILLARREAL, MARK**
STREET ADDRESS **361 DUNCAN LOOP W. #307**
CITY-ST-ZIP **DUNEDIN FL 34698**

TITLE **SD** ☒ Change ☐ Addition
NAME **Maria Bernal**
STREET ADDRESS **2321 Stag Run Blvd**
CITY-ST-ZIP **Clearwater, FL 33765**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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: **MARY DEMOSS**
Mary DeMoss

April 11, 2003 (727) 442-8820

CR2E037 (10/02)