

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N35681

1. Entity Name

PREVENTION, REHABILITATION, EDUCATION PROGRAMS,

Principal Place of Business

4711 N. HUBERT AVENUE
TAMPA FL 33614
US

Mailing Address

P.O. BOX 152928
TAMPA FL 33684-2928

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

59-2984442

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

JUSTICE, HELEN B
4711 N HUBERT AVE
TAMPA FL 33614

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 T ☐ Delete
NAME CLARKE, S., GEORGE
STREET ADDRESS 5206 E 127TH AVE
CITY-ST-ZIP TAMPA FL 33617

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

TITLE D ☐ Delete
NAME QUINN, PHILIP F.
STREET ADDRESS 17017 SHADY PINES DR.
CITY-ST-ZIP LUTZ FL

TITLE President ☒ Change ☐ Addition
NAME Quinn, Philip F.
STREET ADDRESS 17017 Shady Pines Dr.
CITY-ST-ZIP Lutz, FL

TITLE D ☐ Delete
NAME WILLIAMS, E.D.
STREET ADDRESS 11308 SANDPIPE ROAD
CITY-ST-ZIP RIVERVIEW FL

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

TITLE S ☐ Delete
NAME BAXLEY, CLARK
STREET ADDRESS 11250 N. 56TH ST
CITY-ST-ZIP TEMPLE TERRACE FL 33617

TITLE Director ☒ Change ☐ Addition
NAME Baxley, Clark
STREET ADDRESS 11250 N. 56th St.
CITY-ST-ZIP Temple Terrace, FL 33617

TITLE P ☒ Delete
NAME BLY, RANDY E
STREET ADDRESS 1515 N. WESTSHORE BLVD.
CITY-ST-ZIP TAMPA FL 33607

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Secretary ☐ Change ☒ Addition
NAME Hapner, Elizabeth
STREET ADDRESS 3014 Sabal Road
CITY-ST-ZIP Tampa, FL 33618

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-14-2000 (813) 871-3283

CR2E037 (9/99)