

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000002562

1. Entity Name

FIRST COAST WOMEN'S SERVICES, INC.

FILED
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90043 034 ****70.00

Principal Place of Business

Mailing Address

11215 SAN JOSE BLVD
JACKSONVILLE FL 32223
US

11215 SAN JOSE BLVD
JACKSONVILLE FL 32223
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

59-3200240

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WILLIAMS, D. GARY
11215 SAN JOSE BLVD
JACKSONVILLE FL 32223

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.

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

| | | |
|----------------|-------------------------|--------------------------------------------|
| TITLE | RSD | <input type="checkbox"/> Delete |
| NAME | DIEHM, MELANIE | |
| STREET ADDRESS | 1046 LARKSPUR LANE | |
| CITY-ST-ZIP | JACKSONVILLE FL 32259 | |
| TITLE | VCD | <input checked="" type="checkbox"/> Delete |
| NAME | DAVIS, JUDY | |
| STREET ADDRESS | 8210 BAHIA BLANCA CT | |
| CITY-ST-ZIP | JACKSONVILLE FL 32256 | |
| TITLE | ED | <input type="checkbox"/> Delete |
| NAME | BUSH, TERRY | |
| STREET ADDRESS | 129 N. SAN PABLO RD. | |
| CITY-ST-ZIP | JACKSONVILLE FL | |
| TITLE | CD | <input type="checkbox"/> Delete |
| NAME | GRIFFITH, KERI | |
| STREET ADDRESS | 7840 RITTENHOUSE LANE | |
| CITY-ST-ZIP | JACKSONVILLE FL 32256 | |
| TITLE | TD | <input type="checkbox"/> Delete |
| NAME | BUNNELL, JEFF | |
| STREET ADDRESS | 1209 HAMMOCK OAKS DRIVE | |
| CITY-ST-ZIP | JACKSONVILLE FL 32223 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|----------------|-------------------------|------------------------------------------------------------------------------|
| TITLE | VCD | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | David Dingfield | |
| STREET ADDRESS | 7807 Timberlin PK Blvd. | |
| CITY-ST-ZIP | Jacksonville, FL 32256 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> 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:

Signature of B. Bequie
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/9/02

904-262-6300

CR2E037 (9/01)