

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000005327

1. Entity Name

FLORIDA JUVENILE JUSTICE ASSOCIATION, INC.

FILED
Apr 03, 2000 8:00 am
Secretary of State

04-03-2000 90179 038 ****61.25

Principal Place of Business

Mailing Address

411 OFFICE PLAZA DRIVE
TALLAHASSEE FL 32301
US

411 OFFICE PLAZA DRIVE
TALLAHASSEE FL 32301-2756
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3248498

Applied For

Not Applicable

Zip

Country

Zip

Country

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

FONTAINE, MARK P
411 OFFICE PLAZA DRIVE
TALLAHASSEE FL 32301

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
DPP
CANTLEY, EARNEST D
3875 TIGER BAY RD.
DAYTONA BEACH FL 32124 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DBM
OIK, THOMAS K
3333 W. PENSACOLA STREET, STE. 300
TALLAHASSEE FL 32304 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PE
FEULNER, JERRY DR
5029 NORTH LANE
ORLANDO FL 32808 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
205 South Eola Drive
Orlando FL 32801

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
MORROCCO, JOHN
4612 N 56TH ST
TAMPA FL 33610 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TS
HAMILTON, NANCY
10901-C ROOSEVELT BLVD, STE 1000
ST. PETERSBURG FL 33716 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
6655 66th Street, North
Pinellas Park, FL 33781

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPE
MULEY, MIKE
907 N. GADSDEN STREET
TALLAHASSEE FL 32303 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
177 Salem Court
Tallahassee FL 32301

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 any other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/00

Date

Daytime Phone #

CR2E037 (9/99)