

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

FILED
Aug 04, 2003 8:00 am
Secretary of State

08-04-2003 90139 031 ****61.25

DOCUMENT # N94000005152

1. Entity Name

SOUTHEAST VOLUSIA SERVICES, INC.



Principal Place of Business

**508 PALMETTO ST.
NEW SMYRNA BEACH FL 32168
US**

Mailing Address

**401 PALMETTO ST
NEW SMYRNA BEACH FL 32168
US**

30148670



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

401 Palmetto Street

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

New Smyrna Beach, FL

City & State

4. FEI Number **59-3287185**

Applied For

Not Applicable

Zip
32168

Country
USA

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**HEEKIN, JAMES F JR
215 N EOLA DR
ORLANDO FL 32801**

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. I am familiar with, and accept the obligations of registered agent.

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
After September 10, 2003, min will be \$236.25

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 NAME STREET ADDRESS CITY-ST-ZIP	PD WELSH, RUSSELL L 255 N CAUSEWAY NEW SMYRNA BEACH FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LEWIS, ARVIN 401 PALMETTO ST NEW SMYRNA BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SHILDECKER, WILLIAM C. 401 PALMETTO ST. NEW SMYRNA BCH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CREWE, BRUCE 401 PALMETTO ST NEW SMYRNA BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Kathy Leonard 401 Palmetto Street New Smyrna Beach, FL 32168	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Tim Drury 401 Palmetto Street New Smyrna Beach, FL 32168	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Wanda Gerson 401 Palmetto Street New Smyrna Beach, FL 32168	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Steve Harrell 401 Palmetto Street New Smyrna Beach, FL 32168	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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]* **SIGNATURE REQUIRED KATHY LEONARD**

7/23/03

386 424-5000

CR2E037 (4/03)