

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000002948

1. Entity Name

HAPPINESS HOUSE EASTER SEAL FOUNDATION, INC.

Principal Place of Business

350 BRADEN AVENUE
SARASOTA FL 34243

Mailing Address

350 BRADEN AVENUE
SARASOTA FL 34243-2001

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

65-0611186

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

CELORIE, DENNIS J
350 BRADEN AVENUE
SARASOTA FL 34243

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 PD
NAME SERRY, MICHAEL W
STREET ADDRESS 11701 CREEK SHED PLACE
CITY-ST-ZIP SARASOTA FL 34240 ☐ Delete

TITLE TD
NAME Small, Harvey
STREET ADDRESS 1819 Main Street #201
CITY-ST-ZIP Sarasota, FL 34236 ☐ Change ☒ Addition

TITLE VD
NAME MALKIN, CYNTHIA
STREET ADDRESS 4089 ROBERTS POINT RD
CITY-ST-ZIP SARASOTA FL 34242 ☐ Delete

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

TITLE SD
NAME KINNAN, MARGE
STREET ADDRESS 5903 RIVERVIEW BLVD W
CITY-ST-ZIP BRADENTON FL 34209 ☐ Delete

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

TITLE TD
NAME MITCHELL, THOMAS P
STREET ADDRESS 1819 MAIN ST
CITY-ST-ZIP SARASOTA FL 34236 ☒ Delete

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

TITLE P
NAME CELORIE, DENNIS J.
STREET ADDRESS 350 BRADEN AVE.
CITY-ST-ZIP SARASOTA FL 34243 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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:

Dennis Celorie

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90071 045 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)