2000 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 02, 2000 08:00 AM DOCUMENT # N9600004301 1. Entity Name **Secretary of State** HALIFAX MEDICAL CENTER EMPLOYEE COMMUNITY SERVICE FUND Principal Place of Business Mailing Address 303 NO CLYDE MORRIS BLVD 303 N. CLYDE MORRIS BLVD. ATTN: GENERAL COUNSEL DAYTONA BEACH DAYTONA BEACH FL FL 32114 321142709 2. Principal Place of Business 3. Mailing Address 303 NO CLYDE MORRIS BLVD 303 N. CLYDE MORRIS BLVD. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE ATTN: GENERAL COUNSEL City & State City & State 4. FEI Number Applied For DAYTONA BEACH FL DAYTONA BEACH FL 23-7337259 Not Applicable Zic Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П 32114 321142709 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DAVIDSON 303 NO CLYDE MORRIS BLVD. Street Address (P.O. Box Number is Not Acceptable) DAYTONA BEACH FL32114 US 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. 02/02/2000 **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to . . \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delate TITLE D ☐ Addition NAME SAWYER .ПМ NAME BEEBE WILLIAM STREET ADDRESS 1304 SUWANEE ROAD STPEET ADDRESS 1226 EDNA DRIVE CITY-ST-ZIP DAYTONA BEACH FL32114 CITY-ST-ZIP PORT ORANGE FL32119 TITLE ☐ Delete D | Change ☐ Addition NAME SMITH NAME SMITH ЛΜ ЛМ STREET ADDRESS 5820 NOB HILL BLVD. STREET ADDRESS 5820 NOB HILL BLVD. CITY-ST-ZIP PORT ORANGE 32127 CITY-ST-ZIP PORT ORANGE \mathbf{FL} 32127 TITLE ☐ Delete TITLE TD X Change Addition NAME NAME OTURU MARY OTURU MARY STREET ADDRESS 107 LUNA CIRCLE 107 LUNA CIRCLE STREET ADDRESS CITY-ST-ZIP ORMOND BEACH FL. 32174 CITY-ST-7IP ORMOND BEACH \mathbf{FL} 32174 TITLE ☐ Delete TITLE XI Change ☐ Addition NAME NORFOLK PHYLLIS ALLEN DANA STREET ADDRESS 1057 AUDREY DR STREET ADDRESS 303 N. CLYDE MORRIS BLVD CITY-ST-ZIF DAYTONA BEACH 32117 CITY-ST-ZIP DAYTONA BEACH 32114 TITLE ☐ Delete VD TITLE PD X Change ☐ Addition NAME FLYNT LIZZIE NAR/F FLYNT LIZZIE STREET ADDRESS 808 S. MARTIN LUTHER KING BLVD. STREET ADDRESS 808 S. MARTIN LUTHER KING BLVD. CITY-ST-ZIP DAYTONA BEACH FL 32214 CITY-ST-ZIP DAYTONA BEACH FL. 32114 TITLE ☐ Delete TITLE XI Change ☐ Addition NAME SNODGRASS SNODGRASS STREET ADDRESS 1212 WAVERLY DRIVE STREET ADDRESS

32218

CITY-ST-ZIP

CITY-ST-ZIP

DAYTONA BEACH

1212 WAVERLY DRIVE

DAYTONA BEACH

^{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.

SHEPHERD, JIM (T/D)

652 NORTH KEPLER RD. DELAND, FL 32724

NEAL, HELEN (D)

303 N. CLYDE MORRIS BLVD. DAYTONA BEACH, FL 32114

EVANS, KATHY (D)

303 N. CLYDE MORRIS BLVD. DAYTONA BEACH, FL 32114

COLBERT, JOANN (D)

303 N. CLYDE MORRIS BLVD. DAYTONA BEACH, FL 32114