

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000005292

1. Entity Name

ST. FRANCIS SOCIETY, INC.

Principal Place of Business

1911 LAKE PLATT LANE
TAMPA FL

Mailing Address

1911 LAKE PLATT LANE
TAMPA FL

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3469332

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STAFFORD, STEWARD L
15951 N. FLORIDA AVE.
LUTZ FL 33549

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 D ☐ Delete
NAME CALKIN, RON
STREET ADDRESS 712 GATEWAY LANE
CITY-ST-ZIP TAMPA FL 33613

TITLE D ☒ Delete
NAME LEAR, ROBYN
STREET ADDRESS 16910 HAWKRIDGE RD
CITY-ST-ZIP LITHIA FL 33547

TITLE D ☒ Delete
NAME JACKSON, CHRISTINE
STREET ADDRESS 28453 MEADOWRUSH WAY
CITY-ST-ZIP WESLEY CHAPEL FL 33543

TITLE D ☐ Delete
NAME KELLY, CHERYL
STREET ADDRESS 19015 WEATHERSTONE DR
CITY-ST-ZIP TAMPA FL 33647

TITLE D ☒ Delete
NAME SCHWARTZ, ALICIA
STREET ADDRESS 8551 HUNTER'S KEY CIRCLE
CITY-ST-ZIP TAMPA FL 33647

TITLE D ☐ Delete
NAME ALUISY, RAQUEL
STREET ADDRESS 1911 LAKE PLATT LANE
CITY-ST-ZIP TAMPA FL 33618

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE T ☐ Change ☒ Addition
NAME Linda Rollison
STREET ADDRESS 11132 Windpoint Dr
CITY-ST-ZIP Tampa, FL 33635

TITLE S ☐ Change ☒ Addition
NAME Karene Schneider
STREET ADDRESS 4902 Plantation Dr
CITY-ST-ZIP Tampa FL 33615

TITLE D ☐ Change ☒ Addition
NAME Karen Hubby
STREET ADDRESS 5101 Excellence #316
CITY-ST-ZIP Tampa, FL 33617

TITLE D ☐ Change ☒ Addition
NAME Denise Selsky
STREET ADDRESS 7725 Alvin St
CITY-ST-ZIP Tampa, FL 33635

TITLE D ☐ Change ☒ Addition
NAME Lorri Schumpf
STREET ADDRESS 14738 Lake Magdalene Circle
CITY-ST-ZIP Tampa, FL 33613

TITLE D ☐ Change ☒ Addition
NAME Ruth Nelson
STREET ADDRESS 5813 Jenny Dr
CITY-ST-ZIP Tampa, FL 33613

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 Steward L. Stafford
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/26/01
Date

Daytime Phone #

FILED

Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90108 045 ****61.25

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DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)