

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90195 024 ***150.00

DOCUMENT # P01000096020

1. Entity Name

NEW BEHAVIORAL DIRECTIONS, INC.

Principal Place of Business

**500 BELCHER ROAD SOUTH #159
LARGO FL 33771**

Mailing Address

**500 BELCHER ROAD SOUTH #159
LARGO FL 33771**

2. Principal Place of Business

524 Virginia Lane

Suite, Apt. #, etc.

3. Mailing Address

524 Virginia Lane

Suite, Apt. #, etc.

City & State

Clearwater, Florida

City & State

Clearwater, Florida

4. FEI Number

59-3754373

Applied For

Not Applicable

Zip

33764

Country

USA

Zip

33764

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

WEIGAND, PATRICIA A

**500 BELCHER ROAD SOUTH #159
LARGO FL 33771**

7. Name and Address of New Registered Agent

Name

Patricia A. Weigand

Street Address (P.O. Box Number is Not Acceptable)

500A

524 Virginia Lane

City

Clearwater

FL

Zip Code

33764

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 **Patricia A. Weigand, PRESIDENT**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-15-02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	Vice President	<input type="checkbox"/> Delete
NAME	Donna Bowman	
STREET ADDRESS	1501 N. Belcher Road	
CITY-ST-ZIP	Clearwater, Florida 33765	
TITLE	Secretary	<input type="checkbox"/> Delete
NAME	Deborah Turner	
STREET ADDRESS	1501 N. Belcher Road	
CITY-ST-ZIP	Clearwater, Florida 33765	
TITLE	Carol Fullford, CEO	<input type="checkbox"/> Delete
NAME	524 Virginia Lane	
STREET ADDRESS	Clearwater, Florida 33764	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Patricia A. Weigand, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-02

Date

(727) 799-3330

Daytime Phone #

CR2E034 (9/01)