## **2002 UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT # 729802** 1. Entity Name

## LIFESOUTH COMMUNITY BLOOD CENTERS, INC.

C

**SIGNATURE:** 

Principal Place of Business 221 N.W. 13TH STREET AINESVILLE FL 32601-4111		Mailing Address 1221 N.W. 13TH STREET GAINESVILLE FL 32601-4111						
								NII BIRNI IAA
. Principal P	lace of Business	3. Mailing Address						
Suite, Apt. #, etc. City & State		Suite, Apt. #, etc.  City & State			DO NOT WRITE IN THIS SPACE			
					4. FEI Number	9-1545914	<u> </u>	pplied For
Zip Country		Zip	Cou	intry	5. Certificate of Status Desired		Not Applicable  \$8.75 Additional Fee Required	
	6. Name and Address of Curre	nt Registered Agent	1		7. Name and Add	ress of New Registered		<del></del>
				Name				
			•	Street Addres	es (P.O. Boy Number is I	Not Acceptable)		
HASWELL, JOHN				Street Addres	s (P.O. Box Number is Not Acceptable)			
211 NE FIL	HST ST LE FL 32601							
GAINESVIL	LE FL 32001			City		F	Zip Cod	le
	named entity submits this statement						<b>L</b>	
	Signature, typed or printed name of registered age	ent and title if applicable. (NC	TE: Registered	d Agent signature req	quired when reinstating)	. DATE		
3	FILE NOW: FEE IS \$61.25	9. Election Ca			<b>\$5.00</b> May Be		ck Payable	
3	FILE NOW: FEE IS \$61.25	9. Election Co Trust Fund			\$5.00 May Be Added to Fees		ck Payable ent of State	
3 2 3 5	OFFICERS AND I	Trust Fund			Added to Fees		ent of State	<b>l</b> 10
	OFFICERS AND D	Trust Fund	11.	on.	Added to Fees	Departm	ent of State	<b>l</b> 10
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FILED
May 10, 2002 8:00 am
Secretary of State
05-10-2002 90032 024 \*\*\*\*70.00

Daytime Phone #