## **2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT # 701635**

1. Entity Name

SENIOR CITIZENS SERVICES, INC.



**FILED** Apr 11, 2003 8:00 am Secretary of State
04-11-2003 90114 031 \*\*\*\*70.00

Principal Place of Business 940 COURT STREET CLEARWATER FL 33756		Mailing Address 940 COURT STREET CLEARWATER FL 33756			( 100)( 100) 80(0)	110 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	i Bibli bibli bib	ni Be <b>h</b> il 4 <b>88</b> 1	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES					
City & State		City & State			4. FEI Number 59-0938570 Applied For Not Applicable				
Zip	Country	Zip	Zip Country		5. Certificate of Status Desired \$8.75 Additional Fee Required			litional	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent				
LAZAR, JAMES 1468 CAROLYN LANE CLEARWATER FL 34615				Name WITTENBERG, ROBERT  Street Address (P.O. Box Number is Not Acceptable)  1726 PENNY LANE  City CLEARWATER FL Zip Code 33756					
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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE    Columbia   Columb									
Trust Fund Cor				⊔ 	Added to Fees	Florida Depart			
10.	OFFICERS AND DIR		11.		ADDITIONS/CHANGES	TO OFFICERS AND DIF			
TITLE NAME	ROBINSON, DEAN S	<b>⊠</b> Delete	TITLE NAME	P, 0	. =	(1-1)	☐ Change	Addition	
STREET ADDRESS	1327 S DUNCAN AVE		STREET ADDRESS	HA	LE, WILLIA	AM E. (DK)			
CITY-ST-ZIP	CLEARWATER FL 33756		CITY-ST-ZIP	23	DI JONES O	OURT 34698-27	222		
TITLE	VD	Delete	TITLE	IV. O			☐ Change	<b>★</b> Addition	
NAME	LIVINGSTON, JOHN R.		NAME		EEK, JOHI			•	
STREET ADDRESS	2250 W. DRUID RD APT 803		STREET ADDRESS	10	O OAKMON	T LANE,#6	06		
CITY-ST-ZIP	CLEARWATER FL 33764	··· <u></u>	CITY-ST-ZIP			, FL. 33756			
TITLE	VD	Delete	TITLE	Y, D			☐ Change	Addition	
NAME	HALE, WILLIAM E DR		NAME STRFFT ADDRESS	1208	STICE, WIL	LIAM G.			
STREET ADDRESS (	2307 JONES COURT DUNEDIN FL 34698		CITY-ST-ZIP	191	2 CLEVELA	UD ST.	<b>6</b> -200		
	STD	. M.				, FL. 3376	☐ Change	<b>7</b> Addition	
TITLE NAME	BELCHER, CHARLES	Delete	TITLE NAME	S <sub>I</sub> T,		4.8	∟ Change	Addition	
	975 BAYSHORE DR. N.		STREET ADDRESS		FFIN, TAY	76		}	
CITY-ST-ZIP	SAFETY HARBOR FL		CITY-ST-ZIP	3 2	SESOTO PLA	FL. 33756	-1021	.}	
TITLE	D	Delete	TITLE		C. DIR.	<u> </u>	Change	Addition	
NAME	LAZAR, JAMES		NAME		· <del>-</del>	CORECT			
STREET ADDRESS.	1468 CAROLYN LANE		STREET ADDRESS	33	TTENBERG 26 PENNY	LANE			
CITY-ST-ZIP ''	CLEARWATER FL 33755	23.5	CITY-ST-ZIP	Ċ	LEARWAT	ER, FL. 33	3756		
TITLE	1	☐ Delete	TITLE	T		<del></del>	☐ Change	☐ Addition	
NAME	·		NAME						
STREET ADDRESS			STREET ADDRESS	}				1	
CITY-ST-ZIP		<u></u>	CITY-ST-ZIP	L		<u></u>			
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.									

EROBERT WITTENBERG, EXEC. DIRECTOR 727-442-8104 **SIGNATURE:**