## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 705645**

1. Entity Name

THE WATERFRONT RESCUE MISSION, INC.

## FILED Jan 26, 2000 8:00 am Secretary of State

,				O1	-26-2000 90183 00	)] ****(	51.25	
Principal Pla	ce of Business	<del></del>	<del></del>					
16 WEST MAIN STREET PENSACOLA FL 32594		P. O. BOX 870 PENSACOLA FL 32594-0870			D0003750			
				( EURAUEU	Lio acide encla acidi acide encla	1 <b>0</b> 00 <b>200</b> 00 <b>0</b> 0	DU DIALE DUE	an and an alba
Principal Place of Business     3. Mailing Address						1811 21811 BY	<b>a</b> ii bibi bib	
16 West Main Street		P. O. Box 870		11001([] 11	an agial Bilia aliti di£81 alit \$	1014 8(8)1 614	015 B181 B101	I( B(B)) (B#(
Suite, Apt	#, etc.	Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·		DO NOT WRITE IN	THIS SPA	CE	
City & Sta	ite .	City & State	<del></del> _	4 FEIN			I IAm	nlind For
_Pensacola. FL		Pensacola, FI,		4. FEI Numbe	4. FEI Number 59-0838106 Applied For Not Applied For			
Zip Country		Zip Country		5 O-466-14	SR 75 Additional			
32501	Escambia	32594-0870	Escambia			Fee	Required	
	6. Name and Address of Current	Registered Agent	Nome	7. Name and	Address of New Regist	ered Age	nt -	<u>-</u>
			Name				_	_
GRAY, LU 16 W MAI	ITHER EDMOND, JR "LEO" N ST		Street /	Address (P.O. Box Numbe	r is Not Acceptable)			
PENSACOLA FL 32594								
			City			FL	Zip Code	9
8. The above	e named entity submits this statement for	the purpose of changing its	registered office of	r registered agent, or bot	h, in the state of Florida.		·	
SIGNATURE					,			
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOT	E: Registered Agent signa	ture required when reinstating)		DATE	_	
FILE NOW:  9. Election Campaign Fi FEE IS \$61.25  Trust Fund Contribution				\$5.00 May Be Added to Fees	Make Ch Departi			_
10.	10. OFFICERS AND DIRECTORS			ADDITIONS/CH	ANGES TO OFFICERS AN	ND DIREC	TORS IN	10
TITLE	PD	☐ Delete	11.	P/D	NIGEO TO GITTOETRO71		<b>C</b> hange	
NAME	BELL, KEN		NAME	Dye, Rick				
STREET ADDRESS 3149 BELLE CHRISTIANE PL			STREET ADDRESS CITY-ST-ZIP	112 W. Cerva	ntes St.			
CITY-ST-ZIP	I LIVONOULA I L			Pensacola, F	L 32501			
TITLE	VP	🔀 Delete	TITLE	VP/D		G	Change	Addition
NAME STREET ADDRESS	ENZOR, DEE 4111 MCCLELLAN RD			Boyd, LaDon				
CITY-ST-ZIP			STREET ADDRESS - CITY-ST-ZIP		970 McClellan Rd.			
TITLE	TD :	☐ Delete	TITLE	Pensacola, F	L_32503		Change	Addition
NAME	WELK, CHARLES	LJ Defete	NAME				Change	☐ Addition
STREET ADDRESS	2420 W DELANO ST		STREET ADDRESS					
CITY-ST-ZIP	PENSACOLA FL 32505		CITY-ST-ZIP					
TITLE	SD	Delete	TITLE	S/D .		<u> </u>	Change	Addition
NAME	OAKS, MIKE		NAME	Jones, Jr.,	Elbert			
STREET ADDRESS	PO BOX 1151	STR		324 W. Stron	W. Strong St.			
CITY-ST-ZIP	PENSACOLA FL 32520		CITY-ST-ZIP	Pensacola, F	L_32501			
TITLE	D CDAV LEO	☐ Delete	TITLE	Executive Di	rector	X	Change	Addition Addition
STREET ADDRESS			NAME STREET ADDRESS	Gray, Leo	m ! 1			
CITY-ST-ZIP	GULF BREEZE FL 32561	CITY-			0 Tall Pine Trail f Breeze, FL 32561			
TITLE		☐ Delete	TITLE	Guir preeze'	<u>гп 27361</u>		Change	
NAME		n neigle	NAME .	D		1281	onanye	☐ MOUITOR
STREET ADDRESS			STREET ADDRESS	Bell, Ken				
CITY-ST-ZIP			CITY-ST-ZIP		hristiane Pl.			
	pertify that the information supplied with to on this report or supplemental report is:	bio fillos dese est evelit. fee	the everyther etc	rensucola, P	Libration (further		h	

of the corporation or the receiver of trusted empowered to execute this report as required by Chapter 617, Fiorida 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. TORE Leo-Gray Fixegutive Director

(850)438-4027

Daytime Phone #