

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 709132

1. Entity Name

EASTER SEALS EAST CENTRAL FLORIDA, INC.

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90055 009 ****70.00

Principal Place of Business

Mailing Address

3661 SOUTH BABCOCK STREET
MELBOURNE FL 32901-8221

3661 SOUTH BABCOCK STREET
MELBOURNE FL 32901-8205

2. Principal Place of Business

3. Mailing Address

3661 S. Babcock Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Melbourne FL

4. FEI Number

59-0881758

Applied For

Not Applicable

Zip

Country

Zip

Country

32901-8221

Brevard

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GANNAWAY, THOMAS W
3661 SOUTH BABCOCK STREET
MELBOURNE FL 32901

Name
Spanagel, H. A. Interim Director
Street Address (P.O. Box Number is Not Acceptable)

3661 South Babcock Street,
City Melbourne FL Zip Code 32901-8221

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 Herman A. Spanagel, Interim Director

3 APR 2000

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DC ☐ Delete
NAME DROPSKI, CYNTHIA R
STREET ADDRESS 680 EAU GALIE BLVD
CITY-ST-ZIP MELBOURNE FL

TITLE D/C ☒ Change ☐ Addition
NAME REEDER, G. BRUCE
STREET ADDRESS 1421 Gateway Drive,
CITY-ST-ZIP Melbourne FL 32901

TITLE DVC ☐ Delete
NAME REEDER, BRUCE
STREET ADDRESS 2495 WICKHAM ROAD
CITY-ST-ZIP MELBOURNE FL

TITLE D/VC ☒ Change ☐ Addition
NAME WILLMARTH, ROBERT
STREET ADDRESS 251 Naylor Drive
CITY-ST-ZIP ~~MELBOURNE FL 32901~~

TITLE DVC ☐ Delete
NAME WILLMARTH, ROBERT
STREET ADDRESS 261 NAYLOR DRIVE
CITY-ST-ZIP WEST MELBOURNE FL

TITLE D/T ☒ Change ☐ Addition
NAME KRASNY, SCOTT
STREET ADDRESS 304 Harbor City Blvd, Ste 201
CITY-ST-ZIP Melbourne FL 32919

TITLE DT ☐ Delete
NAME KRASNY, SCOTT
STREET ADDRESS 304 HARBOR CITY BLVD, SUITE 201
CITY-ST-ZIP MELBOURNE FL 32919

TITLE D/Asst.T ☐ Change ☒ Addition
NAME PORTER, VICKI LeB.
STREET ADDRESS 901 S. Harbor City Blvd, Ste. 500
CITY-ST-ZIP Melbourne FL 32901

TITLE SD ☒ Delete
NAME STARLING, DALE
STREET ADDRESS P.O. BOX 372978
CITY-ST-ZIP SATELLITE BEACH FL

TITLE D/S ☐ Change ☒ Addition
NAME CORBY, JOANNE
STREET ADDRESS 2462 Chappell Drive,
CITY-ST-ZIP Melbourne FL 32934

TITLE PCEO ☒ Delete
NAME REAM, GERALD L
STREET ADDRESS 3661 S BABCOCK ST
CITY-ST-ZIP MELBOURNE FL 32901

TITLE ID ☐ Change ☒ Addition
NAME SPANAGEL, HERMAN A.
STREET ADDRESS 3661 S. Babcock Stret,
CITY-ST-ZIP Melbourne FL 32901-8221

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/00

(321) 952-0808

Date

Daytime Phone #

CR2E037 (9/99)