2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#710174

Entity Name: THE EPILEPSY ASSOCIATION OF CENTRAL FLORIDA, INC

FILED Jan 08, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 22 W. LAKE BEAUTY DR., STE. 314-A 22 W. LAKE BEAUTY DRIVE ORLANDO, FL 32806 SUITE 314 ORLANDO, FL 32806 **Current Mailing Address:** New Mailing Address: 22 W. LAKE BEAUTY DR., STE. 314-A 22 W. LAKE BEAUTY DRIVE SUITE 314 ORLANDO, FL 32806 ORLANDO, FL 32806 US FEI Number: 23-7247844 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CARMEN, CHARLES F CARMEN, CHARLES F 22 W LAKE BEAUTY DR STE 314 22 W LAKE BEAUTY DRIVE ORLANDO, FL 32806 SUITE 314 ORLANDO, FL 32806 US 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: 01/08/2003 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete STEENBERGH, ROBERT SALVAGE, COLLEEN Name: Name: 707 MENDHAM BLVD. # 104 Address: 3936 S. SEMORAN BLVD. Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip: ORLANDO, FL 32822 US (X) Change () Addition Title: () Delete Title: RUFENER, CHERI Name: Name: LEVETT, LEANNE Address: 947 VINERIDGE RUN Address: P.O. BOX 934545 City-St-Zip: ALTAMONTE SPRINGS, FL City-St-Zip: WINTER PARK, FL 32793-454 US Title: () Delete Title: (X) Change () Addition SALVAGE, COLLEEN Name: KATZ, RICHARD Name: 3936 S SEMORAN BLVD.,# 216 4466 JOHN YOUNG PARKWAY Address: Address: City-St-Zip: ORLANDO, FL 32822 City-St-Zip: ORLANDO, FL 32804 US Title: () Delete Title: (X) Change () Addition Name: ALLEN, EDGAR Name: CHERI, RURENER 1822 SOUTH SUMMERELIN AVE. 604 COURTLAND ST, SUITE 200 Address: Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32804 US Title: () Delete Title: () Change (X) Addition WILLIAM, COLEMAN Name: Name: 2142 LAKE PINELOCH BLVD. Address: Address: ORLANDO, FL 32806 US City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition TONI. D'ANGELO Name: Name: Address: Address: 2681 DANIELLE DR. OVIEDO, FL 32765 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: COLLEEN SALVAGE MS. 01/08/2003

ELIZABETH CAMM, MD

MARSHA REECE ORLANDO, FL

ROBERT STEENBERGH ORLANDO, FL

MARK ORNSTEIN ORLANDO, FL

GEORGE NAHAS ORLANDO, FL

WILLIE MAY ORLANDO, FL

PAUL KENNEDY ORLANDO, FL