2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2001 8:00 am
Secretary of State
03-05-2001 90320 010 ****61.25

0025597

DOCUMENT # 712001

1. Entity Name

PRESBYTERIAN SPECIAL SRVICES, INC.

Principal Place of Business	Mailing Address
3395 GRAND AVENUE GLENWOOD FL 32722	P.O. BOX 220036 GLENWOOD FL 32722

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1159090 ☐ Applied For ☐ Not Applicable

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
DAVIS, W BLAKE 3395 N. GRAND AVE. GLENWOOD FL 32722	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D CATHERS, MARGARET 372 BELLA VISTA EDGEWATER FL 32141	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCD AITKEN, ROBERT 3022 TURTLE DOVE TRAIL DELAND, FL 32720	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C SANDERS, EDWIN P.B. 120 W. INDIANA, SUITE 207 DELAND FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD BRUNS, CAROLE 40 MEADOWOOD TRAIL DELAND, FL 32724	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GABRIEL, EUGENE K 141 BRANDY HILLSDRIVE PORT ORANGE FL 32119	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BIRDSALL, WILLIAM 36340 VIA MARCIA RD. FRUITLAND PARK, FL 34740	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARTIN, WILMA 1351 GREENLAND TERRANCE DELAND FL 32720	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GAEL, ART 13275 SE 106 TERRACE OCKLAWAHA, FL 32179	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WEIGEL, ALLYN ISLAND GROVE DRIVE DELAND FL 32720	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D YEH, CHARLES 9800 SW 3RD CT PLANTATION FL 33324	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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 REQUIRED Chairman 2/28/2001 (904)-734-2874
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #