

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 712001

1. Entity Name

PRESBYTERIAN SPECIAL SRVICS, INC.

FILED

May 20, 2002 8:00 am
Secretary of State

05-20-2002 90066 018 ****61.25

Principal Place of Business

Mailing Address

3395 GRAND AVENUE
GLENWOOD FL 32722

P.O. BOX 220036
GLENWOOD FL 32722

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 D ☐ Delete
NAME CATHERS, MARGARET
STREET ADDRESS 372 BELLA VISTA
CITY-ST-ZIP EDGEWATER FL 32141

TITLE VCD ☐ Change ☒ Addition
NAME Aitken, Robert
STREET ADDRESS 3022 Turtle Dove Trail
CITY-ST-ZIP Deland, FL 32720

TITLE C ☐ Delete
NAME SANDERS, EDWIN P.B.
STREET ADDRESS 120 W. INDIANA, SUITE 207
CITY-ST-ZIP DELAND FL

TITLE DST ☐ Change ☒ Addition
NAME Bruns, Carolle
STREET ADDRESS 40 meadowood Trail
CITY-ST-ZIP Deland, FL 32724

TITLE D ☒ Delete
NAME GABRIEL, EUGENE K
STREET ADDRESS 141 BRANDY HILLS DRIVE
CITY-ST-ZIP PORT ORANGE FL 32119

TITLE D ☐ Change ☒ Addition
NAME Birdsall, William
STREET ADDRESS 36340 Via Marcia Rd
CITY-ST-ZIP Fruitland Park, FL 34740

TITLE D ☐ Delete
NAME MARTIN, WILMA
STREET ADDRESS 1351 GREENLAND TERRANCE
CITY-ST-ZIP DELAND FL 32720

TITLE D ☐ Change ☒ Addition
NAME Gael, Art
STREET ADDRESS P.O. Box 1803
CITY-ST-ZIP Belleview, FL 34421-1803

TITLE D ☐ Delete
NAME WEIGEL, ALLYN
STREET ADDRESS ISLAND GROVE DRIVE
CITY-ST-ZIP DELAND FL 32720

TITLE D ☐ Change ☒ Addition
NAME Murdock, Richard
STREET ADDRESS 20 Birdie Drive
CITY-ST-ZIP New Smyrna Beach, FL 32069

TITLE D ☐ Delete
NAME YEH, CHARLES
STREET ADDRESS 9800 SW 3RD CT
CITY-ST-ZIP PLANTATION FL 33324

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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, 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 another like empowered.

Edwin P.B. Sanders

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/24/02 (386) 743-2874

CR2E037 (9/01)