2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2003 8:00 am
Secretary of State
02-26-2003 90165 033 ****61.25

UCR6312

DOCUMENT # 717448

1. Entity Name

LOUISE GRAHAM REGENERATION CENTER, INC.

Principal Place of Business	Mailing Address
2301 3RD AVE SOUTH ST PETERSBURG FL 33712-1646 US	2301 3RD AVE SOUTH ST PETERSBURG FL 33712-1646 US

☐ CHECK HERE IF MAKING CHANGES

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 59-1305743 ☐ 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
LEEDS III, FRANK 2301-3RD AVENUE SOUTH ST PETERSBURG FL 33712	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. I am familiar with, and accept the obligations of registered agent.

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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SHIRLEY, BENJAMIN 627 69TH AVENUE SOUTH ST. PETERSBURG FL	☒ Delete	Chair Vern Farnsworth 696 1st Ave S #100 St Petersburg Fl 33701	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CLINGMAN, JOY D 140 7TH AVENUE SOUTH ST. PETERSBURG FL	☒ Delete	Treasure Lesi Daniel 263 13th Ave S St Petersburg Fl 33701	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ED LEEDS III, FRANK 390 BOCA CIEGO POINT BLVD ST. PETERSBURG FL	☐ Delete	Sec Jennifer Howard Black 4116 34th St S St Petersburg Fl 33711	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JENKINS, ROBERT MD 2642 70TH AVE S. ST. PETERSBURG FL 33712	☒ Delete	Karen Miller SPC P.O. Box 13489 St Petersburg, Fl 33733	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

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: Frank Leeds III REG FRANK Leeds III 1-3-03 727-327-9444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE TELEPHONE NUMBER