

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 724184

1. Entity Name

ASSOCIATION FOR RETARDED CITIZENS/ESCAMBIA, INC.

FILED
Jun 08, 2000 8:00 am
Secretary of State

06-08-2000 90014 043 ****70.00

Principal Place of Business

Mailing Address

3916 N 10TH AVE
PENSACOLA FL 32503-2806
US

3916 N 10TH AVENUE
PENSACOLA FL 32503-2807
US

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

59-0940528

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

FASSETT, DONNA
3916 N 10TH AVENUE
PENSACOLA FL 32503

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

Donna Fasset

Donna Fasset, Exec Dir

5/20/00

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 PD ☒ Delete
NAME LEAHY, ROSILAN
STREET ADDRESS 1086 SEABREEZE LANE
CITY-ST-ZIP GULF BREEZE FL 32561

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

TITLE VPD ☒ Delete
NAME HARRIS, REYNOLD
STREET ADDRESS 281 PLANTATION RD
CITY-ST-ZIP GULF BREEZE FL 32561

TITLE S, D ☒ Change ☐ Addition
NAME Linda Gimbelsley
STREET ADDRESS 3501 Arizona Dr
CITY-ST-ZIP Pensacola FL 32504

TITLE TD ☐ Delete
NAME EVANS, JAMES
STREET ADDRESS 3407 APPLGATE DR
CITY-ST-ZIP PENSACOLA FL 32514

TITLE P, D ☒ Change ☐ Addition
NAME Evans, James
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME HAYES, LYNN
STREET ADDRESS 5122 GULL POINT DR
CITY-ST-ZIP PENSACOLA FL 32504

TITLE RP, D ☒ Change ☐ Addition
NAME Lynn Hayes
STREET ADDRESS
CITY-ST-ZIP

TITLE ED ☐ Delete
NAME FASSETT, DONNA
STREET ADDRESS 3916 N 10TH AVENUE
CITY-ST-ZIP PENSACOLA FL 32503

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T, D ☒ Change ☐ Addition
NAME Denis McKinnon
STREET ADDRESS 3 W. Garden St Ste 700
CITY-ST-ZIP Pensacola FL 32501

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:

Donna Fasset

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/20/00 850-434-2638

Date

Daytime Phone #