

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 726916

FILED
Jan 08, 2002
Secretary of State

Entity Name: MARION-CITRUS MENTAL HEALTH CENTERS, INC.

Current Principal Place of Business:

5664 SW 60TH AVENUE, BLDG 1
OCALA, FL 34474 US

New Principal Place of Business:

5664 SW 60TH AVENUE, BLDG 1
OCALA, FL 34477 US

Current Mailing Address:

5664 SW 60TH AVENUE
BUILDING 1
OCALA, FL 34474 US

New Mailing Address:

5664 SW 60TH AVENUE
BUILDING 1
OCALA, FL 34477 US

FEI Number: 51-0177273

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RASCO, RUSSELL
1761 SE 38 CT
OCALA, FL 34471

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: WINES, LUCY ANN
Address: 6161 N. MISTY OAK TERRACE
City-St-Zip: BEVERLY HILLS, FL 34465

Title: P () Delete
Name: SPIVEY, STEPHEN
Address: 230 NE 25TH AVE
City-St-Zip: OCALA, FL 34470

Title: T () Delete
Name: GROSS, DAVID
Address: 14109 SE 51ST AVENUE
City-St-Zip: SUMMERFIELD, FL 34491

Title: S () Delete
Name: GANNON, JOSEPH
Address: 43 GULFVIEW DRIVE
City-St-Zip: HOMOSASSA, FL 34446

Title: D () Delete
Name: ALEXANDER, JODY
Address: 3001 S E LAKE WEIR, #916
City-St-Zip: OCALA, FL 34471

Title: D () Delete
Name: BREFFLE, ROSALIE
Address: 13707 SW 115 CIRCLE
City-St-Zip: DONNELTON, FL 34432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WINES, LUCY ANN
Address: 6161 N. MISTY OAK TERRACE
City-St-Zip: BEVERLY HILLS, FL 34465

Title: VP (X) Change () Addition
Name: LYTTLE, RICHARD
Address: P. O. BOX 2890
City-St-Zip: OCALA, FL 34478

Title: T (X) Change () Addition
Name: ASCHLIMAN, DEAN
Address: 421 N. E. 48TH AVENUE
City-St-Zip: OCALA, FL 34470

Title: S (X) Change () Addition
Name: OSTERHOUDT, CLARA
Address: 4622 N. JADEMOOR DRIVE
City-St-Zip: BEVERLY HILLS, FL 34465

Title: D (X) Change () Addition
Name: OTT, KAREN
Address: TWO N SHADOW WOOD DRIVE
City-St-Zip: INVERNESS, FL 34450

Title: D (X) Change () Addition
Name: BUFFORD, VINESSA
Address: 1841 S E 38TH COURT
City-St-Zip: OCALA, FL 34471

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: LUCY ANN WINES

P

01/08/2002

Electronic Signature of Signing Officer or Director

Date