

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2001 8:00 am
Secretary of State

0016951

DOCUMENT # 730703

1. Entity Name

WEST FLORIDA CHILD CARE & EDUCATION SERVICES, IN

03-26-2001 90039 025 ****70.00

Principal Place of Business

**1800 NORTH PALAFOX
PENSACOLA FL 32501**

Mailing Address

**1800 NORTH PALAFOX
PENSACOLA FL 32501**

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

23-7432194

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

~~BERGADO~~ **KIRSCH, BECKY
1800 NORTH PALAFOX
PENSACOLA FL 32501**

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 ☐ Delete
NAME **D**
STREET ADDRESS **MCCORVEY, ELVIN**
CITY-ST-ZIP **HALL CENTER, 51 TEXAR DRIVE
PENSACOLA FL**

TITLE ☐ Change ☒ Addition
NAME **VP**
STREET ADDRESS **Drinkard, Bubba**
CITY-ST-ZIP **4453 Berryhill Road
Milton, Florida 32571**

TITLE ☐ Delete
NAME **M**
STREET ADDRESS **KIRSCH, BECKY**
CITY-ST-ZIP **1800 NORTH PALAFOX STREET
PENSACOLA FL 32501**

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

TITLE ☒ Delete
NAME **D**
STREET ADDRESS **HURSTON, ROD**
CITY-ST-ZIP **P.O. BOX 711 N/A
PENSACOLA FL**

TITLE ☐ Change ☒ Addition
NAME **P**
STREET ADDRESS **Brown, Eugene**
CITY-ST-ZIP **29 South Spring Street
Pensacola, Florida 32501**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **SALTER, BETTY**
CITY-ST-ZIP **P.O. BOX 13204 N/A
PENSACOLA FL 32591**

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

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **DRINKARD, BUBBA**
CITY-ST-ZIP **4553 BERRYHILL RD.
MILTON FL 32571**

TITLE ☒ Change ☐ Addition
NAME **T**
STREET ADDRESS **Miller, Karen**
CITY-ST-ZIP **1000 W. Moreno Street
Pensacola, Florida 32501**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **PLYE, ANN**
CITY-ST-ZIP **150 EAST BURGESS RD.
PENSACOLA FL 32501**

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 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: *Bernard Kirsch*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-22-01 850-595-5936

Date

Daytime Phone #

CR2E037 (10/00)