

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 735175**

1. Entity Name

TELEPHONE COUNSELING AND REFERRAL SERVICE, INC.**FILED**
Jun 16, 2002 8:00 am
Secretary of State

05-06-2002 90290 039 ****61.25

Principal Place of Business P.O. BOX 10960 TALLAHASSEE FL 32302-2960 US		Mailing Address PO BOX 10960 TALLAHASSEE FL 32302 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 51-0201771		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NICKLAUS, RANDALL 4482 ARGYLE LANE TALLAHASSEE FL 32303		7. Name and Address of New Registered Agent 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 NAME STREET ADDRESS CITY-ST-ZIP	VPD WELCH, ANDY 840 SANTA ROSA DRIVE TALLAHASSEE FL 32301	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Christine McMillon-Lane P.O. Box 15635 Tallahassee FL 32317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BUCKLEY, BRUCE 1900 CENTRE POINTE BLVD., APT 178 TALLAHASSEE FL 32308	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Jerry Osteryoung 2912 Brandemere Tallahassee FL 32312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ED NICKLAUS, RANDALL 4482 ARGYLE LANE TALLAHASSEE FL 32308	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Buckley, Bruce 1461 Vieux Carre Dr. Tallahassee FL 32308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SHADY, LORI 2537 FRED SMITH ROAD TALLAHASSEE FL 32303	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Lori Shady 322 47th Street N St. Petersburg FL 33713
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE 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: Randall S. Nicklaus 4/22/2002 850-681-9131			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

CR2E037 (9/01)

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 735175**

1. Entity Name

TELEPHONE COUNSELING AND REFERRAL SERVICE, INC.

Telephone Counseling & Referral Service
 Bringing People and Services Together Since 1970
 A United Way Member Agency

Kathleen Taylor
 Business Manager

Office 850-681-9131 x230
 Fax 850-561-3443
 businessmanager@tcrs211.org
 P.O. Box 10950
 Tallahassee, FL 32302-2950
 www.tcrs211.org

- Helpline24
- PhoneFriend
- The Connection
- Family Health Line
- Florida HIV/AIDS Hotline
- Community Resource Directory



DO NOT WRITE IN THIS SPACE

4. FEI Number **51-0201771** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NICKLAUS, RANDALL
4482 ARGYLE LANE
TALLAHASSEE FL 32303

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Zip Code

8. The above named entity submits this statement for the

SIGNATURE

Signature, typed or printed name of registered agent and title

FILE NOW: FEE IS \$61.25

6/12/2002
Talked to Steve 12:00.
Said to mail it today.

k Payable to
nt of State

10. OFFICERS AND DIRECTORS

DIRECTORS IN 10

☐ Change ☒ Addition☐ Change ☒ Addition☒ Change ☐ Addition☒ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition

ify that the information
 in an officer or director
 Block 10 or Block 11 if

12. I hereby certify that the information supplied with this file
 indicated on this report or supplemental report is true and
 correct, and that the information is true and correct as of the date
 of the corporation or the receiver or trustee empowered
 changed, or on an attachment with an address, with all

SIGNATURE: *Randall S. Nicklaus* **Randall S. Nicklaus** 4/22/2002 850-681-9131

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E037 (9/01)