2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 737927

1. Entity Name

SOLVE OF PASCO COUNTY, FLORIDA, INC.

FILED
Jan 13, 2000 8:00 am
Secretary of State
01-13-2000 90029 021 ****61.25

Principal Place of Business	Mailing Address
6708 WASHINGTON ST NEW PORT RICHEY FL 34652 US	6708 WASHINGTON ST NEW PORT RICHEY FL 34652-1957

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Same address as above	6708 Washington St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: New Port Richey, Fl.
Zip / Country: West Pasco	Zip: 34652 / Country

4. FEI Number: 59-2769003 ☐ 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
O'CONNOR, RITA M 7301 JASMINE BLVD NEW PORT RICHEY FL 34668	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	RS TAYLOR, MARY SUE 7916 YUCCA SR NEW PORT RICHEY FL 34653	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Marianne Rosario 6230 Keller Drive Port Richey, Florida 34668	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SPD POWERS, GERARD F 5430 HIGH ST. NEW PORT RICHEY FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	None	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DUSTEN, MARIE 3806 SABLEWOOD DR. HOLIDAY FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD O'CONNOR, RITA 7301 JASMINE BOULEVARD PORT RICHEY FL 34668	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MADURA, STELLA 7748 CHERRY TREE LANE NEW PORT RICHEY FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D O'CONNOR, RITA M. 7301 JASMINE BLVD. PORT RICHEY FL 34668	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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: Rita M. O'Connor Jan. 6- 2000. 727-863-2295
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #