2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2002 8:00 am
Secretary of State
02-19-2002 90030 049 ****70.00

DOCUMENT # 741799

1. Entity Name

FLORIDA GEORGIA BLOOD ALLIANCE, INC.

Principal Place of Business	Mailing Address
536 W 10TH STREET JACKSONVILLE FL 32206-3526 US	536 W 10TH STREET JACKSONVILLE FL 32206-3526 US

DO NOT WRITE IN THIS SPACE

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 59-0766984 ☐ 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
MALLOY, DALE R 536 W. 10TH ST. JACKSONVILLE FL 32206	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	DS VAN NORTWICK, WILLIAM JR. 301 MARTIN LUTHER KING JR. BLVD. TALLAHASSEE FL 32399-1850	☒ Delete	DS Paige, Kevin, Operations Administrator 4201 Belfort Road Jacksonville, FL 32216	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MALLOY, DALE R 536 WEST 10TH STREET JACKSONVILLE FL 32206	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV ANDERSON, JOHN E 1801 ART MUSEUM DRIVE P.O. BOX 45243 JACKSONVILLE FL 32232	☒ Delete	DC Threadcraft, Milton H. Jr. 4831 Greenland Road Jacksonville, FL 32258	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC BRUNS, WILLIAM S ONE INDEPENDENT DRIVE, STE. 1900 JACKSONVILLE FL 32202	☐ Delete	D Burns, William S	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KEENE, M.D. WILLIS R. 130 NORTH GROSS ROAD KINGSLAND CA 31548	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT DEWITT, LINDA 3060 PORTULACA AVE JACKSONVILLE FL 32224	☒ Delete	DT Courtney, William M. Jr. 2687 Holly Point Orad East Orange Park, FL 32073	☐ Change ☒ Addition

CR2E037 (9/01)

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: Dale R Malloy SIGNATURE REQUIRED Dale R. Malloy 1/28/02 (904) 353-8263
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #