2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mar 17, 2003 8:00 am | Secretary of State **DOCUMENT # 742632** 1. Entity Name 03-17-2003 91068 029 ****61.25 PRESBYTERIAN HOMES OF TAMPA, INC. Principal Place of Business Mailing Address 4033 S MANHATTAN AVE 1051 2ND AVE N **TAMPA FL 33611** ST PETERSBURG FL 33705 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-2001439 Applied For Not Applicable Ζiρ Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name AHRENHOLZ, THOMAS Street Address (P.O. Box Number is Not Acceptable) 1051 SECOND AVE. NO. ST. PETERSBURG FL 33705 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. I am familiar with, and accept 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 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State ło OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ASD ☐ Delete TITLE ☐ Addition NAME LUKENS, ELAINE NAME STREET ADDRESS 2245 GLENMOOR RD STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 34624 CITY-ST-ZIP TITLE TD Delete TITLE Change NAME NUSSBAUM, LEO ☐ Addition NAME STREET ADDRESS 6909 9TH ST SO # 336 STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG FL=33705 CITY-ST-ZIP TITLE DVP ☐ Delete TITI F NAME Change ☐ Addition ALBERTS, HENK NAME STREET ADDRESS 10911 CARROLLWOOD DR STREET ADDRESS CITY-ST-ZIP TAMPA FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME MILLER, LAURA NAME STREET ADDRESS 390 WASHINGTON CT STREET ADDRESS CITY-ST-ZIP FT MYERS FL CITY-ST-ZIP TITLE SD Delete TITLE ☐ Change NAME Addition DAVIES, IDRIS NAME STREET ADDRESS 2084 MASACHUSETTS AVE. N.E. STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change NAME ☐ Addition JONES, GLORIA

FILED

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

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

4302 DEEPWATER LANE

TAMPA FL 33615

STREET ADDRESS

CITY-ST-ZIP

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