2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 03, 2001 08:00 AM 757676 DOCUMENT # 1. Entity Name **Secretary of State** CENTER AGAINST SPOUSE ABUSE, INC. Principal Place of Business Mailing Address 432 5TH AVENUE NORTH PO BOX 414 P O BOX 414 ST. PETERSBURG FL ST PETERSBURG 337310414 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number City & State Applied For 59-2114359 Not Applicable Zip 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 POLSON MARILYN Street Address (P.O. Box Number is Not Acceptable) FISHER & SAULS, PA 100 SECOND AVENUE SOUTH, SUITE 701 ST. PETERSBURG FL33701 US City 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. 01/03/2001 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE VPD Change X Addition NAME NAME HALL. BERNIE STREET ADDRESS STREET ADDRESS 7428 WATERSILK DRIVE CITY-ST-ZIP CITY-ST-ZIP PINELLAS PARK FT. 33782 X Delete TITLE VPD TITLE ☐ Change ☐ Addition NAME STROSS JOHN NAME STREET ADDRESS 54 COREY AVENUE STREET ADDRESS CITY-ST-ZIF ST. PETERSBURG BEACH 33706 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME SHADWICK CATHY NAME STREET ADDRESS 4338 1ST STREET NORTH SUITE A STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG CITY-ST-ZIP FL33703 TITLE Delete TITLE X Change Addition NAME OSMUNDSON, LINDA A. NAME OSMUNDSON LINDA STREET ADDRESS 432 5TH AVE NORTH STREET ADDRESS 432 5TH AVE NORTH CITY-ST-ZIP 33701 ST. PETERSBURG CITY-ST-ZIP FL. ST. PETERSBURG FL. 33701 TITLE SD 🔀 Delete TITLE Change ☐ Addition NAME FESTA-MOORE DONNA NAME STREET ADDRESS 4420 SECOND AVENUE NORTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAINT PETERSBURG \mathbf{FL} 33713 TITLE PD □ Delete TITLE Change Addition NAME SCOTT DONNA NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: _

STREET ADDRESS

CITY-ST-ZIP

LINDA A, OSMUNDSON

2321 14TH STREET NORTH

SAINT PETERSBURG

SMUNDSON

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33704

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01/03/2001

Davime Phone

CR2E037 (11/00)

CONTRERAS, SANDRA 4852 NAPOLI COURT NE SD

ST. PETERSBURG, FL 33703