

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 759377

1. Entity Name

THE FAMILY RESOURCE PROGRAM OF SOUTH OKALOOSA CO

FILED
Feb 29, 2000 8:00 am
Secretary of State

02-29-2000 90120 031 ****61.25

Principal Place of Business 340 BEAL PKWY NW FT WALTON BEACH FL 32548 US	Mailing Address FAMILY RESOURCE PROGRAM OF OKALOOSA COUNTY 340 BEAL PKWY. N.W. FORT WALTON BEACH FL 32548-3924 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

4. FEI Number 59-2211700	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**EBEOGLU, SHERYL
340 BEAL PKWY., N.W.
FORT WALTON BEACH FL 32548**

7. Name and Address of New Registered Agent

Name
Rosemary Jones

Street Address (P.O. Box Number is Not Acceptable)
340 Beal Pkwy. NW

City
Fort Walton Beach FL Zip Code
32548

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 *Rosemary Jones* **2/2/2000**

(NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. ADDITIONAL PERSONS OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MITCHELL, PATSY 500 WOODLAND PARK MARY ESTHER FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STAUSKAS, CATHY 418 NORTH HAMPTON CIRCLE FT WALTON BEACH FL 32548	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HANDSEL, LYNN 6 WEDGEWOOD LANE FT WALTON BCH FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD EBEOGLU, SHERYL 154 COUNTRY CLUB RD SHALIMAR FL 32579	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KRAWCZYK, NANCY 322 OAK LAKE LANE NICEVILLE FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLEISZAR, KATHY 7 MEIGS DRIVE SHALIMAR FL	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Yvonne Body 723 Greenwood St. Fort Walton Beach, FL 32547	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Terry Williams 105-B Aspen Drive Eglin AFB, FL 32542	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Robert Nelson 4400 Hwy. 20, Suite 312 Niceville, FL 32578	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Mabel Prescott 87 Barracuda Destin, FL 32541	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Edie Crook 320 Lang Rd. Fort Walton Beach, FL 32548	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sally Cotumaccio 18 Indian Bayou Rd. Destin, FL 32541	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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: *Sheryl Ebeoglu* **REQUIRED** **2/2/00** **(850) 651-2063**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)

759372 613520

2000 UNIFORM BUSINESS REPORT

The Family Resource Program of South Okaloosa Co.

Addendum to Block 11 Document #759377

Additional Directors

Rosemary Jones
340 Beal Pkwy, NW
Fort Walton Beach, FL 32548

Gerry Bagley
340 Beal Pkwy. NW
Fort Walton Beach, FL 32548

Melanie Cassulo
326 Harbor Place
Fort Walton Beach, FL 32548

Frances Fowler
407 Juniper Street
Destin, FL 32541

Ann Farrar
340 Beal Pkwy. NW
Fort Walton Beach, FL 32548