

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 762852

FILED  
Jan 25, 2002 8:00 AM  
Secretary of State

**Entity Name:** DAVID LAWRENCE MENTAL HEALTH CENTER, INC.

**Current Principal Place of Business:**

6075 GOLDEN GATE PARKWAY  
NAPLES, FL 34116 US

**New Principal Place of Business:**

**Current Mailing Address:**

6075 GOLDEN GATE PARKWAY  
NAPLES, FL 34116

**New Mailing Address:**

**FEI Number:** 59-2206025

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHIMMEL, DAVID C.  
6075 GOLDEN GATE PARKWAY  
NAPLES, FL 34116 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: PEARSON, C A  
Address: 2885 GULF SHORE BLVD N #604  
City-St-Zip: NAPLES, FL 34103

Title: VD ( ) Delete  
Name: GAST, JOHN  
Address: 801 LAUREL OAK DR  
City-St-Zip: NAPLES, FL 34108

Title: D ( ) Delete  
Name: KELLY, SHAUN  
Address: 801 ANCHOR RODE DR  
City-St-Zip: NAPLES, FL 34103

Title: D ( ) Delete  
Name: MINARICH, KIM  
Address: 15600 WATER OAK CT  
City-St-Zip: PUNTA GORDA, FL 33982

Title: TD ( ) Delete  
Name: PEZESHKAN, LINDA  
Address: 2309 HARRIET RUN  
City-St-Zip: NAPLES, FL 34105

Title: P ( ) Delete  
Name: ABEMATHY, KENNETH  
Address: 4200 BELAIR LANE #108  
City-St-Zip: NAPLES, FL 34103

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: SD (X) Change ( ) Addition  
Name: BROWN, JR., HAROLD REVEREN  
Address: 105 SAINT ANDREWS BLVD.  
City-St-Zip: NAPLES, FL 34113 US

Title: VD (X) Change ( ) Addition  
Name: PEZESHKAN, LINDA  
Address: 2309 HARRIET RUN  
City-St-Zip: NAPLES, FL 34105 US

Title: PD (X) Change ( ) Addition  
Name: GAST, JOHN  
Address: 801 LAUREL OAK DRIVE  
City-St-Zip: NAPLES, FL 34108 US

Title: TD (X) Change ( ) Addition  
Name: WHITNEY, SCOTT  
Address: 6045 COCOS DRIVE  
City-St-Zip: FORT MYERS, FL 33908 US

Title: D (X) Change ( ) Addition  
Name: ABERNATHY, KENNETH  
Address: 4200 BELAIR LANE #108  
City-St-Zip: NAPLES, FL 34103 US

Title: D (X) Change ( ) Addition  
Name: KELLY, SHAUN  
Address: 801 LAUREL OAK DRIVE  
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN GAST

P

01/25/2002

Electronic Signature of Signing Officer or Director

Date

COX, PH.D., LMFT, JUSTYNA, DIRECTOR  
671 PORTSIDE DRIVE  
NAPLES, FL 34103

MORGAN, DR. THOMAS, DIRECTOR  
1900 EMPRESS COURT  
NAPLES, FL 34110

WEBSTER, GAIL, DIRECTOR  
HUNTINGTON NATIONAL BANK, PELICAN BAY OF  
8889 PELICAN BAY BLVD., SUITE 101  
NAPLES, FL 34108

BARTON, PAT, DIRECTOR  
605 PALM E  
NAPLES, FL 34102

HANLON, ESQ., SHARON, DIRECTOR  
2656 AIRPORT ROAD SOUTH  
NAPLES, FL 34112

LASCHEID, DR. WILLIAM, DIRECTOR  
372 EDGEMERE WAY NORTH  
NAPLES, FL 34105