## 2003 UNIFORM BUSINESS REPORT (UBR)

US

**DOCUMENT#766042** 

Entity Name: THE SOCIAL CENTER, INC.

FILED Feb 11, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6318 ARLINGTON RD JACKSONVILLE, FL 32211

Current Mailing Address: New Mailing Address:

6318 ARLINGTON RD 5469 RIVER TRAIL RD. N
JACKSONVILLE, FL 32211 US JACKSONVILLE, FL 32277 US

FEI Number: 59-2273532 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HUGHES-FISHER, ALICE
RICHARD, RYALS RA
6318 ARLINTON RD
6318 ARLINTON RD
6318 ARLINTON RD

JACKSONVILLE, FL 32211 US JACKSONVILLE, FL 32211 US

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: RICHARD RYALS 02/11/2003

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: FISHER, ALICE, Name: FISHER, GARY W

Address: 6318 ARLINGTON RD Address: 5469 RIVER TRAL RD. N
City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip: JACKSONVILLE, FL 32277 US

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition

 Name:
 BADGER, MILDRED
 Name:
 DUNN, CHERYL

 Address:
 4412 CLYDER DR.
 Address:
 401 .S 9TH ST.

City-St-Zip: JACKSONVILLE, FL City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: D ( ) Delete Title: S/T (X) Change ( ) Addition Name: FISHER, GARY Name: FISHER, ALICE B S/T

 Address:
 5469 RIVER TEAL RD N
 Address:
 5469 RIVER TRAIL RD. N

 City-St-Zip:
 JACKSONVILLE, FL 32211
 City-St-Zip:
 JACKSONVILLE, FL 32277 US

 Name:
 HICKS, JOAN
 Name:
 RICHARD, RYALS

 Address:
 1102 RIO ST. JOHNS
 Address:
 6308 ARLINGTON RD. N

 City-St-Zip:
 JAY, FL
 City-St-Zip:
 JACKSONVILLE, FL 32211 US

Fitte: VD ( ) Delete Title: D (X) Change ( ) Addition

Title: ( ) Delete Title: (X) Change ( ) Addition FISHER, GARY W FISHER, GARY W Name: Name: 5469 RIVER TRAIL RD. N. 5469 RIVER TRAIL RD. N. Address: Address: City-St-Zip: JACKSONVILLE, FL 32277 US City-St-Zip: JACKSONVILLE, FL 32277 US

Title: ( ) Delete Title: D ( ) Change (X) Addition

Name: Name: DUNN, CHERYL Address: Address: 401 S 9TH AVE.

City-St-Zip: City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

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: GARY FISHER P 02/11/2003