

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 770107

1. Entity Name

COMMUNITY BLOOD CENTER, INC.

**FILED**  
**May 01, 2000 8:00 am**  
**Secretary of State**

05-01-2000 90461 014 \*\*\*\*61.25

Principal Place of Business

Mailing Address

% THOMAS R. BROWN  
2660 AIRPORT ROAD SOUTH  
NAPLES FL 33962

% THOMAS R. BROWN  
2660 AIRPORT ROAD SOUTH  
NAPLES FL 34112-4885

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2324307

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BROWN, THOMAS R.  
2660 AIRPORT ROAD SOUTH  
NAPLES FL 33942

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

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  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete  
NAME D  
STREET ADDRESS FORDHAM, JACK  
CITY-ST-ZIP 350 SEVENTH ST., NORTH  
NAPLES FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME PD  
STREET ADDRESS CRONE, WILLIAM G  
CITY-ST-ZIP 350 SEVENTH ST NO  
NAPLES FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME CED  
STREET ADDRESS HERREN, NORMAN A.  
CITY-ST-ZIP 350 SEVENTH ST. NO.  
NAPLES FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME D  
STREET ADDRESS BLANCHARD, FRANCIS  
CITY-ST-ZIP 380 SEAVIEW COURT #609  
MARCO ISLAND FL 34145

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME CD  
STREET ADDRESS KARPAS, CHARLES M.D.  
CITY-ST-ZIP 350 SEVENTH ST. N.  
NAPLES FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME D  
STREET ADDRESS CARROLL, RAYMOND  
CITY-ST-ZIP 118 DEBRON DRIVE  
NAPLES FL 34112

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

**NOT REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

941-436-5100

CR2E037 (9/99)

Community Blood Center, Inc.  
Board of Trustees 2000-2001

770107  
838818

Richard Brinkmeyer  
350 Seventh Street North  
Naples, FL 34102  
Director

Carl Loveday  
350 Seventh Street No.  
Naples, FL 34102  
Director

Raymond Miller  
350 Seventh Street No.  
Naples, FL 34102  
Director

Daniel J. Morris, M.D.  
350 Seventh Street North  
Naples, FL 34102  
Director

Kevin Rambosk  
c/o 350 Seventh Street No.  
Naples, FL 34102  
Director

E. Brent Snodgrass  
350 Seventh Street No.  
Naples, FL 34102  
Director