## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# F00000006179

FILED May 01, 2003 Secretary of State

Entity Name: HEALTH FACILITIES MANAGEMENT AND EDUCATIONAL SERVICES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 6538 NAVAJO TRAIL LAKELAND, FL 33813 **Current Mailing Address: New Mailing Address:** 6538 NAVAJO TRAIL LAKELAND, FL 33813 FEI Number: 22-2492071 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: SIEGEL, SHIRLEY M 6538 NÁVAJO TRAIL LAKEL; AND, FL 33813 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PCD Title: () Delete Title: () Change () Addition SIEGEL, SHIRLEY M Name: Name: 6538 NAVAJO TRAIL Address: Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: Title: Title: () Change () Addition () Delete Name: SIEGEL, SAUL Name: 6538 NAVAJO TRAIL Address: Address: LAKELAND, FL 33813 City-St-Zip: City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAUL SIEGEL VP 05/01/2003