

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2004 8:00 am
Secretary of State

05-13-2004 90006 001 ****78.00

DOCUMENT # F94000006579

1. Entity Name
URBAN ASSISTANCE CORPORATION



Principal Place of Business
**2602 EAST 21ST AVENUE
TAMPA, FL 33605**

Mailing Address
**P.O. BOX 491012
FORT LAUDERDALE, FL 33349-1012 US**

24075100



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04142004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-3259774

☒ Applied For
☐ Not Applicable

Zip

Country

Zip

Country

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

**HAYNES, MICHAEL
2602 EAST 21ST AVE
TAMPA, FL 33605**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Michael A. Haynes

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DUPREE, JACKIE
2104 EAST 28TH AVE
TAMPA, FL 33605** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GARCIA, BEVERLY
2504 EAST CHIPCO AVE
TAMPA, FL 33605** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**C
BELL, BRYANT SR
PO BOX 4066
WINTER PARK, FL 32793** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
HAYNES, MICHAEL
2602 EAST 21ST AVENUE
TAMPA, FL 33605** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
HORNE, ANNIE
6302 WOODSPRAY LANE
TAMPA, FL 33617** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
BARBONE, MICHAEL J
8910 N. DALE MABRY HIGHWAY
TAMPA, FL 33614** ☐ Delete

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

Michael A. Haynes

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

813-842-6655

Attachment

24075100

F94000006579

4/08/04

CORPORATE DETAIL RECORD SCREEN

4:32 PM

NUM: F94000006579 ST:DE ACTIVE/FOREIGN N/P FLD: 12/23/1994

LAST: REINSTATEMENT FLD: 01/04/1996

FEI#: 59-3259774

NAME : URBAN ASSISTANCE CORPORATION

PRINCIPAL: 2602 EAST 21ST AVENUE

CHANGED: 06/30/02

ADDRESS TAMPA, FL 33605

MAILING : P.O. BOX 491012

CHANGED: 02/04/03

ADDRESS FORT LAUDERDALE, FL 33349-1012 US

RA NAME : HAYNES, MICHAEL

RA ADDR : 2602 EAST 21ST AVE

ADDR CHG: 03/02/00

TAMPA, FL 33605 US

ANN REP : (2001) A 03/13/01

(2002) A 06/30/02

(2003) A 02/04/03