

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000000985

1. Entity Name
ATC HEALTHCARE SERVICES, INC.

FILED
Aug 24, 2000 8:00 am
Secretary of State

08-24-2000 90002 032 ***558.75

Principal Place of Business
1983 MARCUS AVE
CB 7011
LAKE SUCCESS NY 11042
US

Mailing Address
1983 MARCUS AVE
CB 7011
LAKE SUCCESS NY 11042
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 58-1642356

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET, STE 105
TALLAHASSEE FL 32301

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DVT
NAME CLIFT, DALER ☒ Delete
STREET ADDRESS 1983 MARCUS AVENUE
CITY-ST-ZIP LAKE SUCCESS NY 11042

TITLE Senior Vice President
NAME Alan Levy ☐ Change ☒ Addition
STREET ADDRESS 1983 MARCUS AVENUE
CITY-ST-ZIP LAKE SUCCESS, NY 11042

TITLE CPD
NAME SAVITSKY, STEPHEN ☐ Delete
STREET ADDRESS 1983 MARCUS AVENUE
CITY-ST-ZIP LAKE SUCCESS NY 11042

TITLE President
NAME David Savitsky ☐ Change ☒ Addition
STREET ADDRESS 1983 MARCUS AVE
CITY-ST-ZIP LAKE SUCCESS NY 11042

TITLE VS
NAME TEIXEIRA, ED ☐ Delete
STREET ADDRESS 1983 MARCUS AVENUE
CITY-ST-ZIP LAKE SUCCESS NY 11042

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

TITLE V
NAME RICHARDS, ROBBIN ☒ Delete
STREET ADDRESS 2675 PACES FERRY ROAD, SUITE 460
CITY-ST-ZIP ATLANTA GA 30339

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature of Alan Levy
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 8/11/00 516-750-1666
Daytime Phone #

CR2E034 (5/00)