## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 02, 2001 8:00 am Secretary of State DOCUMENT # F95000001857 LIFELINK CHILD AND FAMILY SERVICES CORPORATION 04-02-2001 90071 007 \*\*\*\*61.25 Principal Place of Business Mailing Address 331 S. YORK ROAD 201 MONTGOMARY AVE BENSENVILLE IL 60106 SARASOTA FL 34243 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State Applied For City & State 4. FEI Number 36-3487477 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Hedrick Street Address (P.O. Box Number is Not Acceptable) LEONARD, LIZA 201 Montgomery Ave 201 MONTGOMERY AVE SARASOTA FL 34243 Zip Code 34243 Jara sot a 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 (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing **\$5.00** May Be Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. **™** Addition Delete TITLE Chair mon ☐ Channe TITLE Orcker, Alan MEYER, MARLYN NAME NAME 303 W. Madison St. STREET ADDRESS STREET ADDRESS 248 E WASHINGTON CITY-ST-ZIP CITY-ST-ZIP LOMBARD IL 60148 Thicago, 1 60606 Addition ☐ Change **Delete** TITLE TITLE Green. Kathy MINNICK, SUSAN S NAME NAME 2331 Morcy Avenue STREET ADDRESS 440 WAGNER ROAD STREET ADDRESS CITY-ST-ZIP Evanston: 1L CITY-ST-ZIP NORTHFIELD IL 60093 ☐ Addition □ Change TITLE TITLE Delete BERGSTRAIESSER, EDWARD T NAME NAME 212 S. Maple STREET ADDRESS 312 KIENILWORTH STREET ADDRESS CITY-ST-ZIP OAK PARK IL 60302 CITY-ST-ZIP Addition ☐ Delete TITLE Change TITLE ZIMMERMAN, CARL REV NAME NAME STREET ADDRESS 331 S YORK RD STREET ADDRESS CITY-ST-ZIP **BIENSIENVILLE IL 60106** CITY-ST-ZIP Lytte, Director Delete ☐ Change Addition RHODES, TIMOTHY T ulle, Jean NAME NAME 1338 W. Park STREET ADDRESS 1918 COACH RD STREET ADDRESS CITY-ST-ZIP NAPERVILLE IL 60565 CITY-ST-ZIP Arlington Heights, IL 60005 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NOESEN, TOM NAME NAME 331 5. York Road STREET ADDRESS 1237 MANDEL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Bensenville, WESTCHESTER IL 60154 60106 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 except 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:

MEQUIRED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR