

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 09, 2002 8:00 am**  
**Secretary of State**

09-09-2002 90024 035 \*\*\*\*61.25

**DOCUMENT # F96000003648**

1. Entity Name

**OPEN DOOR ADOPTION AGENCY, INC.**

Principal Place of Business

403-B NORTH BROAD ST  
 THOMASVILLE GA 31792

Mailing Address

403-B NORTH BROAD ST P.O. Box 4  
 THOMASVILLE GA 31792 31799

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

**58-1703392**

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

~~FLEMING, ELEANOR~~  
~~COMMUNITY SERVICES BLDG~~  
~~303 N. MADISON ST~~  
~~QUINCY FL 32351~~

**WALTER E. GILBERT**  
**6624 TOMY LEE TAIL**  
**TALLAHASSEE, FL**  
**32309**

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

*Walter E. Gilbert*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**9-5-02**

**After September 13, 2002,**  
**min. will be \$236.25.**

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	T	<input checked="" type="checkbox"/> Delete
NAME	HUNTER, RODNEY	
STREET ADDRESS	200 YORKSHIRE COURT	
CITY-ST-ZIP	THOMASVILLE GA 31792	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	MILTON, GALE	
STREET ADDRESS	104 KINGS FOREST DRIVE	
CITY-ST-ZIP	THOMASVILLE GA 31792	
TITLE	C	<input type="checkbox"/> Delete
NAME	SULLIVAN, SALLY	
STREET ADDRESS	510 SPRINGLAKE ROAD	
CITY-ST-ZIP	THOMASVILLE GA 31792	
TITLE	P	<input type="checkbox"/> Delete
NAME	GILBERT, WALTER E	
STREET ADDRESS	919 GORDON AVE	
CITY-ST-ZIP	THOMASVILLE GA 31792	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<b>TREASURER</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Carrie Morgan	
STREET ADDRESS	101 E. Gate Dr.	
CITY-ST-ZIP	Thomasville, GA 31792	
TITLE	<b>CO-CHAIRMAN</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Cornie Blackburn	
STREET ADDRESS	407 Olive Creek Farms Dr.	
CITY-ST-ZIP	Thomasville, GA 31792	
TITLE	<b>CO-CHAIRMAN</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ed Titus	
STREET ADDRESS	403 Remington Ave.	
CITY-ST-ZIP	Thomasville, GA 31792	
TITLE	<b>SECRETARY</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Darkene Webb	
STREET ADDRESS	306 Spring Lake Rd.	
CITY-ST-ZIP	Thomasville, GA 31792	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

*Walter E. Gilbert*

**9-5-02 229-228-6339**

CR2E037 (4/02)