

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F96000006710

FILED
Jan 23, 2003
Secretary of State

Entity Name: ASSOCIATION FOR CHILDREN FOR ENFORCEMENT OF SUPPORT, INC.

Current Principal Place of Business:

2260 UPTON AVE
TOLEDO, OH 43606

New Principal Place of Business:

Current Mailing Address:

2260 UPTON AVE
TOLEDO, OH 43606

New Mailing Address:

FEI Number: 34-1452416

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEBARON, JANE
799 AUGUST SE
PALM BAY, FL 32909 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: TESTA, PAULA
Address: 7863 ELWOOD DR
City-St-Zip: LAKE WORTH, FL 33467

Title: VD () Delete
Name: RUTOWSKI, CINDY
Address: 3485-2ND ST
City-St-Zip: VERO BEACH, FL 32968

Title: D () Delete
Name: AMBLER, KIM
Address: 135 FERNE LN
City-St-Zip: LAKE WORTH, FL

Title: D () Delete
Name: CASTEEL, KIM
Address: 404 SANDTREE DR
City-St-Zip: PBG, FL

Title: D () Delete
Name: MILLS, ANN
Address: 221 NAYLOR DR
City-St-Zip: WEST MELBOURNE, FL 32904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CINDY RUTOWSKI

CD

01/23/2003

Electronic Signature of Signing Officer or Director

Date