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FILED
Jun 27, 2001 8:00 am
Secretary of State
06-19-2001 90002 022 ****61.25

2001 UNIFORM BUSINESS REPORT (UBR)

49933

[redacted]

DOCUMENT # N00000000559

1. Entity Name

Florida Business Partners for Juvenile Justice, Inc.

Principal Place of Business	Mailing Address
2737 Centerview Dr., Ste. 310 Tallahassee, FL 32399	2737 Centerview Dr., Ste. 310 Tallahassee, FL 32399

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2737 Centerview Dr.	2737 Centerview Dr.
Suite, Apt. #, etc.: Ste. 220	Suite, Apt. #, etc.: Ste. 220
City & State: Tallahassee, FL	City & State: Tallahassee, FL
Zip: 32399 Country: USA	Zip: 32399 Country: USA

4. FEI Number: 59-36 23272 ☐ 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
Lytha Page Belrose 2737 Centerview Dr., Ste. 310 Tallahassee, FL 32399	Name: Saundra F. Roach Street Address (P.O. Box Number is Not Acceptable): 2737 Centerview Dr., Ste. 220 City: Tallahassee FL Zip Code: 32399

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: Saundra F Roach — Saundra F. Roach - Director 06/12/2001
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fee

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition
		D Saundra F. Roach 2737 Centerview Dr., Ste. 220 Tallahassee, FL 32399	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition
		D Kym G. Holcomb 2737 Centerview Dr., Ste. 220 Tallahassee, FL 32399	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition
		D Roderick A. Love 2737 Centerview Dr., Ste. 220 Tallahassee, FL 32399	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E037 (11/00)

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: Saundra F Roach — Saundra F. Roach 06/12/2001 850-488-3302
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #