

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # N00000003344**

1. Entity Name

**ANDREWS COMMUNITY OUTREACH & RESOURCE SERVICES,***WA***FILED**  
**Sep 17, 2001 8:00 am**  
**Secretary of State**

09-17-2001 90154 001 \*\*\*\*61.25

0010331

Principal Place of Business

**301 NW 3RD AVE  
DEERFIELD BEACH FL 33441**

Mailing Address

**301 NW 3RD AVE  
DEERFIELD BEACH FL 33441**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**05-1006488**

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

**GASKINS, LANELDA****301 NW 3RD AVE  
DEERFIELD BEACH FL 33441**

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 \_\_\_\_\_

**FILE NOW: FEE IS \$61.25  
After September 12, 2001, 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	<b>DP</b>			<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	<b>ANDREWS, ANDRE</b>	<b>301 NW 3RD AVE</b>	<b>DEERFIELD BEACH FL 33441</b>							
	<b>DS</b>			<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	<b>BRANCH, EMMA J</b>	<b>301 NW 3RD AVE</b>	<b>DEERFIELD BEACH FL 33441</b>							
	<b>DT</b>			<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	<b>GASKINS, LANELDA</b>	<b>301 NW 3RD AVE</b>	<b>DEERFIELD BEACH FL 33441</b>							
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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:** *Andre Andrews* **REQUIRES** **ANDRE ANDREWS 9-1-01 (954) 232-6952**

CR2E037 (5/01)