

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 16, 2004 8:00 am
Secretary of State

08-16-2004 90012 009 ****61.25

DOCUMENT # N01000005760

1. Entity Name
FLORIDA SUBSTANCE ABUSE CONSORTIUM, INC.



Principal Place of Business
501 E. TENNESSEE ST.
SUITE A
TALLAHASSEE, FL 32308

Mailing Address
501 E. TENNESSEE ST.
SUITE A
TALLAHASSEE, FL 32308

44051841



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.
Suite C
City & State

Suite, Apt. #, etc.
Suite C
City & State

08092004 Chg-NP CR2E037 (10/03)

Zip Country

Zip Country

4. FEI Number
NOT APPLICABLE

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

STIVERS, H.B.
245 E. VIRGINIA ST.
TALLAHASSEE, FL 32301

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME CAUFFIELD, CHRISTINE
STREET ADDRESS 3830 BEE RIDGE RD.
CITY-ST-ZIP SARASOTA, FL 34233

TITLE ☒ Change ☐ Addition
NAME Cauffield, Christine
STREET ADDRESS 1565 state st.
CITY-ST-ZIP Sarasota, FL 34236

TITLE D ☐ Delete
NAME DIAZ, PHILLIP
STREET ADDRESS 5644 COLCORD AVE.
CITY-ST-ZIP JACKSONVILLE, FL 32211

TITLE ☒ Change ☐ Addition
NAME Diaz, Philip
STREET ADDRESS 555 stockton st.
CITY-ST-ZIP Jacksonville, FL 32204

TITLE D ☐ Delete
NAME BISHOP, BARNEY.
STREET ADDRESS 501 E. TENNESSEE ST, STE A
CITY-ST-ZIP TALLAHASSEE, FL 32308

TITLE ☒ Change ☐ Addition
NAME Bishop, Barney-T. III
STREET ADDRESS 501 E. Tennessee St. Suite C
CITY-ST-ZIP Tallahassee, FL 32308

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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: Barney T. Bishop III 8-11-04 (850) 224-1940
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #