

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 13, 2003 8:00 am
Secretary of State

7/16.

07-16-2003 90040 004 ****70.00

DOCUMENT # N02000003139

1. Entity Name

NIGHTINGALE CENTER ASSOCIATION, INC.



Principal Place of Business

**100 NIGHTINGALE LANE
GULF BREEZE FL 32561**

Mailing Address

**100 NIGHTINGALE LANE
GULF BREEZE FL 32561**

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

Applied for

Applied For

Not Applicable

5. Certificate of Status-Desired

☒

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

**LUBKOWITZ, ADELA F
100 NIGHTINGALE LANE
GULF BREEZE FL 32561**

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

**FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25**

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

TITLE	VS	<input checked="" type="checkbox"/> Delete
NAME	ELMORE, MARTHA W	
STREET ADDRESS	332 DEER POINT	
CITY-ST-ZIP	GULF BREEZE FL 32561	
TITLE	PT	<input checked="" type="checkbox"/> Delete
NAME	LUBKOWITZ, ADELA F	
STREET ADDRESS	100 NIGHTINGALE LANE	
CITY-ST-ZIP	GULF BREEZE FL 32561	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President & Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lubkowitz, Adela F.	
STREET ADDRESS	100 Nightingale Lane	
CITY-ST-ZIP	Gulf Breeze, FL 32561	
TITLE	Vice Pres. & Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Fite, Donna	
STREET ADDRESS	206 Center Rd.	
CITY-ST-ZIP	Gulf Breeze, FL 32561	
TITLE	Treasurer & Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ottensmeyer, Margaret	
STREET ADDRESS	206 Center Rd.	
CITY-ST-ZIP	Gulf Breeze, FL 32561	
TITLE	Secretary & Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jacenyik, Marta	
STREET ADDRESS	103 Nightingale Lane	
CITY-ST-ZIP	Gulf Breeze, FL 32561	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sinrod, Harold	
STREET ADDRESS	104 Nightingale Lane	
CITY-ST-ZIP	Gulf Breeze, FL 32561	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lubkowitz, Joachim	
STREET ADDRESS	100 Nightingale Lane	
CITY-ST-ZIP	Gulf Breeze, FL 32561	

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. 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:

Adela F. Lubkowitz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-10-03

Date

850-637-7570

Daytime Phone #

CR2037 (4/03)