

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

FILED
Mar 27, 2003 8:00 am
Secretary of State

03-17-2003 90134 015 ****61.25

DOCUMENT # N02000008932

1. Entity Name

COMMUNITY SUPPORT PROGRAM OF NARANJA, INC



Principal Place of Business

Mailing Address

26940 SW 144 AVE
HOMESTEAD FL 33032
US

26940 SW 144 AVE
HOMESTEAD FL 33032
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

05-0541770

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

Name

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

City

FL

Zip Code

JONES, XAVIER L
26940 SW 144 AVE
HOMESTEAD FL 33032

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, include if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE

2-9-03

FILE NOW: FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
XAVIER, XAVIER L
26940 SW 144 AVE
HOMESTEAD FL 33032 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
BT
Gleadeau Burch
27020 SW 144 Ct
Naranja FL 33032 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
BROWN, VAN G
27035 SW 144 AVE
HOMESTEAD FL 33032 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Sec
Katie Johnson
26910 SW 144 Ave
Homestead FL 33032 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JOHNSON, DEBRA H
27015 SW 144 CT
HOMESTEAD FL 33032 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
~~Marisol Reyes Bautista~~
~~27010 SW 144 Ave~~
~~Naranja FL 33032~~ ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
~~Terah Smith~~ ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
F
Marisol Reyes Bautista
27010 SW 144 Ave
Naranja FL 33032-7507 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Terah Smith
27035 SW 144 Ave
Naranja FL 33032 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
→

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Baker, Elias
26810 SW 144 Ct
Naranja FL 33032 ☐ Delete

TITLE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-9-03 (305)
258-0238

Date

Daytime Phone #

CR2E037 (10/02)