## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N02000009700

Entity Name: COMMUNITIES IN SCHOOLS OF SOUTHWEST FLORIDA, INC.

FILED Apr 04, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1701 14TH STREET WEST SUITE#3 BRADENTON, FL 34205 **New Mailing Address: Current Mailing Address:** 1701 14TH STREET WEST SUITE#3 BRADENTON, FL 34205 FEI Number: 13-4210797 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DIEMER, FRANCINE W 3804 BAMBOO TERRACE BRADENTON,, FL 34210 US 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete ( ) Change (X) Addition SCHAEFER, MICHAEL Name: Name: Address: Address: 8410 MARKET STREET FL4914 City-St-Zip: City-St-Zip: BRADENTON, FL 34202 Title: Title: ( ) Change (X) Addition ( ) Delete THOMPSON, JACKIE Name: Name: Address: Address: 4502 CORTEZ ROAD WEST City-St-Zip: City-St-Zip: BRADENTON, FL 34210 Title: () Delete Title: ( ) Change (X) Addition DIEMER, FRANCINE Name: Name: 3804 BAMBOO TERRACE Address: Address: City-St-Zip: City-St-Zip: BRADENTON, FL 34210 Title: () Delete Title: ( ) Change (X) Addition VAN METRE, LINDA K Name: Name: ONE HURRICANE LANE Address: Address: City-St-Zip: City-St-Zip: BRADENTON, FL 34205 Title: () Delete Title: ( ) Change (X) Addition LUCAS, PATRICIA DR. Name: Name: P.O. BOX 9069 Address: Address: City-St-Zip: City-St-Zip: BRADENTON, FL 34206 Title: () Delete Title: ( ) Change (X) Addition MARR. DEBRA Name: Name: Address: Address: 6116 43RD STREET WEST BRADENTON, FL 34210 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANCINE DIEMER MS. 04/04/2003