

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N04000000800

1. Entity Name

DIVORCE SUPPORT SERVICES, INC.

Principal Place of Business

Mailing Address

365 FIFTH AVENUE SOUTH STE 202
NAPLES FL 34102365 FIFTH AVENUE SOUTH STE 202
NAPLES FL 34102

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 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

HO, VICTORIA M
365 FIFTH AVENUE SOUTH STE 202
NAPLES FL 34102Name EDWIN MURPHY

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

1300 Third St. S., Ste 302-BCity Naples

FL

Zip Code 34102

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

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME HO, VICTORIA M
STREET ADDRESS 365 FIFTH AVENUE SOUTH STE 202
CITY-ST-ZIP NAPLES FL 34102TITLE V ☐ Delete
NAME FRAZIER, MARY E
STREET ADDRESS 814 ANCHOR RD DR
CITY-ST-ZIP NAPLES FL 34103TITLE S ☐ Delete
NAME MURPHY, EDWIN
STREET ADDRESS 1300 3RD ST S, STE 302-B
CITY-ST-ZIP NAPLES FL 34102TITLE T ☐ Delete
NAME GUALARIO, ANTHONY
STREET ADDRESS 791 10TH ST S
CITY-ST-ZIP NAPLES FL 34102TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME MURPHY, EDWIN
STREET ADDRESS 1300 Third St. S, Ste 302-B
CITY-ST-ZIP Naples, FL 34102TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE S ☒ Change ☐ Addition
NAME ROQUANT, PAUL
STREET ADDRESS 1100 FIFTH AVE. S, STE 409
CITY-ST-ZIP Naples, FL 34102TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 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

Date

Daytime Phone #

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90026 011 ***150.00

104391

DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)