

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

FILED
May 23, 2003 8:00 am
Secretary of State

04-29-2003 90047 016 ****61.25

DOCUMENT # N07286

1. Entity Name

FLAGLER COMMUNITY CARE & TRAINING CENTER, INC.



Principal Place of Business

78 FARRAGUT DRIVE
PALM COAST FL 32137
US

Mailing Address

78 FARRAGUT DRIVE
PALM COAST FL 32137
US

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 **59-2539185**

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

HARRIS, JAMES F
78 FARRAGUT DRIVE
PALM COAST FL 32137-8222

7. Name and Address of New Registered Agent

Name **MARY JANE HARRIS**

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

City **PALM COAST**

FL

Zip Code **32137**

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

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

UTD (MARY JANE HARRIS) 4/26/03
(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE **VTD** ☒ Delete
NAME **HARRIS, JAMES F**
STREET ADDRESS **78 FARRAGUT DRIVE**
CITY-ST-ZIP **PALM COAST FL 32137-8222**

TITLE **SD** ☐ Delete
NAME **RICHARDSON, ANNA M**
STREET ADDRESS **7 CERRUDO LN**
CITY-ST-ZIP **PALM COAST FL 32137**

TITLE **PD** ☒ Delete
NAME **ALLEN, JAMES W**
STREET ADDRESS **39 FARRAGUT DRIVE**
CITY-ST-ZIP **PALM COAST FL 32137**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VTD** ☐ Change ☒ Addition
NAME **MARY JANE HARRIS**
STREET ADDRESS **78 FARRAGUT DRIVE**
CITY-ST-ZIP **PALM COAST, FL 32137**

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

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

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

TITLE ☐ Change ☐ Addition
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 life empowered.

SIGNATURE:

James W. Allen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/03
Date

(386) 445-5411
Daytime Phone #

CR2E037 (10/02)