

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 08, 2001 8:00 am
Secretary of State

07-18-2001 90010 032 ****61.25

DOCUMENT #

N12108

1. Entity Name

VOLUSIA COUNTY HEALTH DEPARTMENT EMPLOYEES ASSOCIATION

Principal Place of Business

Mailing Address

501 S. CLYDE MORRIS BLVD
 DAYTONA BEACH, FL
 32114

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 2895 495

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

FISHER, JACK R.
 501 S. CLYDE MORRIS BLVD
 DAYTONA BEACH FL 32114

Name
 RAMIE, SHEILA C.
 Street Address (P.O. Box Number is Not Acceptable)
 717 W CANAL ST
 City
 NEW SMYRNA BEACH FL Zip Code
 32168

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 Sheila C. Ramie, President

Signature, typed or printed name of registered agent and file if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/13/01

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
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	☒ Change ☐ Addition
NAME	RAMIE, SHEILA C.
STREET ADDRESS	717 W. CANAL ST
CITY - ST - ZIP	NEW SMYRNA BEACH FL 32168
TITLE	☒ Change ☐ Addition
NAME	GRAY, JANE
STREET ADDRESS	1330 S. WOODLAND BLVD
CITY - ST - ZIP	DELAND FL 32720
TITLE	☒ Change ☐ Addition
NAME	RICHTER, JANET
STREET ADDRESS	501 S. CLYDE MORRIS BLVD
CITY - ST - ZIP	DAYTONA BEACH FL 32114
TITLE	☒ Change ☐ Addition
NAME	BAHENA, MARISOL
STREET ADDRESS	1330 S. WOODLAND BLVD
CITY - ST - ZIP	DELAND FL 32720
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 like empowered.

SIGNATURE Sheila C. Ramie PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/13/01

Date

356 124 2063

Daytime Phone #

CR2E037 (11/00)