

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Jul 09, 2002 8:00 am
Secretary of State

07-09-2002 90375 001 ****61.25

DOCUMENT # N14351

1. Entity Name

REESE GROUP HOME OF TAMPA BAY, INC.

Principal Place of Business

7614 35TH AVENUE SOUTH
TAMPA FL 33619

Mailing Address

7614 35TH AVENUE SOUTH
TAMPA FL 33619

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2722411

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

REESE, LINDA C.
7614 35TH AVENUE SOUTH
TAMPA FL 33619

Name

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

City

FL

Zip Code

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

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 NAME STREET ADDRESS CITY-ST-ZIP	PD REESE, ROBERT E. 7614 35TH AVENUE SOUTH TAMPA FL 33619	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST REESE, LINDA C. 7614 35TH AVENUE SOUTH TAMPA FL 33619	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REESE, LINDA C. 7614 35TH AVENUE SOUTH TAMPA FL 33619	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, WILLIE MAE 6903 CAMERON AVE TAMPA FL 33614	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Reese, Linda C 7614 So. 35th Ave TAMPA, FLA. 33619	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Reese, Robert Earl 7614 So. 35th Ave Tampa, FLA. 33619	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Charles, Willie Mae 6903 Cameron Ave Tampa, FL 33614	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Deonne Johnson 6903 Cameron Ave Tampa, FL 33614	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Kenneth Woods 7614 So. 35th Ave Tampa, FL 33619	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: *Linda C. Reese* LINDA C. Reese 4-26-02 813-621-7679

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)