## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an aftachment with an address, with all other like empowered

SIGNATURE:

## FILED May 31, 2000 8:00 am Secretary of State DOCUMENT # **N14992** 1. Entity Name HANDICAPPED AMERICANS LOVE OF LIFE ORGANIZATION, 05-31-2000 90025 044 \*\*\*\*61.25 Principal Place of Business Mailing Address 3570 U.S. 27 SOUTH 3570 U.S. 27 SOUTH SEBRING FL 33870 SEBRING FL 33870 2. Principal Place of Business 3. Mailing Address 3568 U.S. 3568 U.S. 27 South 27 South DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2810368 Sebring, Sebring, FLNot Applicable Country \$8.75 Additional Country Zip 33870 5. Certificate of Status Desired USA 33870 Fee Required USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) PIERETTI, DEANNA 1214 LAKEWOOD AVE SEBRING FL 33872 Zip Code City 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** DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. Addition **DCEO** TITLE ☐ Change TITLE ☐ Delete NAME PIERETTI, DEANNA NAME STREET ADDRESS STREET ADDRESS 1214 LAKEWOOD AVE CITY-ST-ZIP CITY-ST-ZIP SEBRING FL 33872 Change Addition TITLE DT TITLE Delete DT YARBOUGH, DORIS NAME NAME Anne Holloway STREET ADDRESS STREET ADDRESS 1555 OAK AVE 1507 Wilson Dr CITY-ST-7IP CITY-ST-ZIP LAKE PLACID FL 33852 Sebring, FL 33872 ☐ Change <sup>1</sup> Addition TITLE □ Delete TITLE NAME norman, beth NAME STREET ADDRESS STREET ADDRESS 326 FRANCIS ST CITY-ST-ZIP CITY-ST-ZIP SEBRING FL 33872 ☐ Addition TITLE Change ☐ Delete NELSON, AMY NAME NAME STREET ADDRESS 1309 OAKWOOD DR STREET ADDRESS CITY-ST-ZIP SEBRING FL 33870 CITY-ST-ZIP Change ☐ Addition TITLE □ Delete TITLE ARMSTRONG, JIM NAME STREET ADDRESS STREET ADDRESS 4141 US 27 N CITY-ST-ZIP CITY-ST-ZIP SEBRING FL 33870 TITLE Delete TITLE ☐ Addition D-Marty Falin NAME KAPLAN, MICHEAL NAME P.O. Box 23 STREET ADDRESS STREET ADDRESS 509 N. PINE ST. Avon Park, FL 33825 CITY-ST-ZIP CITY-ST-ZIP SEBRING FL 33870 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

N14997

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A Charitable, Non Profit Organization for Physically Handicapped Adults

2000 UNIFORM BUSINESS REPORT

DOCUMENT: # N14992

Board Members & Officers: Jim Armstrong, RPT Board Chair

Deanna Pierett.
Founder/CEO

Vic Damigella Director/President

Dorothy Forelli
Director/Vice-President

Doris Yarbrough ~ Director/Treasurer

Al Clements
Director/Past President

Beth Norman

Director/Public Relations

Evelyn Clements

Committee Coordinator

Tom Meekins

Amy Nelson . Director :

Richard Fale Director 10.Additional Director:

Evelyn Clements 3446 Delaware Ave Sebring, FL 33872