

# 2001. UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N21635

1. Entity Name

ESCAMBIA AIDS SERVICES & EDUCATION, INC.

Principal Place of Business

3624 W FAIRFIELD DR  
PENSACOLA FL 32505  
US

Mailing Address

P O BOX 13584  
PENSACOLA FL 32591

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

59-2790233

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

WELCH, JOHN P  
703 S PALAFOX ST  
PENSACOLA FL 32501

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 PD  
NAME GODWIN, AL O ☒ Delete  
STREET ADDRESS 615 SCENIC HWY  
CITY-ST-ZIP PENSACOLA FL

TITLE PD ☒ Change ☐ Addition  
NAME Vickrey, Teresa  
STREET ADDRESS 6 North Coyle St.  
CITY-ST-ZIP Pensacola, FL 32501

TITLE VD ☐ Delete  
NAME VICKREY, TERESA  
STREET ADDRESS 6 NORTH COYLE ST  
CITY-ST-ZIP PENSACOLA FL 32501

TITLE VD ☒ Change ☐ Addition  
NAME Steven Creel  
STREET ADDRESS 1500 E. Johnson Ave. #115  
CITY-ST-ZIP Pensacola, FL 32514

TITLE TD ☐ Delete  
NAME CREEL, STEVEN  
STREET ADDRESS 1500 E. JOHNSON AVE  
CITY-ST-ZIP PENSACOLA FL 32514

TITLE TD ☒ Change ☐ Addition  
NAME Teresa Blankenbeck  
STREET ADDRESS 2211 N. Pace Blvd.  
CITY-ST-ZIP Pensacola, FL 32505

TITLE SD ☐ Delete  
NAME BLANKENBECK, TERESA  
STREET ADDRESS 3624 W. FAIRFIELD DR  
CITY-ST-ZIP PENSACOLA FL 32505

TITLE SD ☐ Change ☒ Addition  
NAME Carla DeDolph  
STREET ADDRESS 913 Gulf Breeze Parkway #5  
CITY-ST-ZIP Pensacola, FL 32561

TITLE MD ☐ Delete  
NAME TISSINGTON, VICKIE  
STREET ADDRESS 3624 W. FAIRFIELD DR  
CITY-ST-ZIP PENSACOLA FL 32505

TITLE D ☐ Change ☒ Addition  
NAME Mark Baker  
STREET ADDRESS 6 North Coyle St.  
CITY-ST-ZIP Pensacola, FL 32501

TITLE D ☒ Delete  
NAME ADAMS, JASON  
STREET ADDRESS 1502 N. BAYLEN ST  
CITY-ST-ZIP PENSACOLA FL 32504

TITLE D ☐ Change ☒ Addition  
NAME Henry Burrell  
STREET ADDRESS 1641 East Maura St.  
CITY-ST-ZIP Pensacola, FL 32503

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

*Vickie T. Tisson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/7/01 (850) 456-7079  
Date Daytime Phone #

C0011366



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)

Attachment  
C0011366  
D# N 21635

**Escambia AIDS Services and Education, Inc.**  
**Board of Directors**  
**July 1, 2000 – June 30, 2001**

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Eugenio-Flores Padilla (D)  
1912 Nicole St.  
Pensacola, FL 32507

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Terry Montez (D)  
116 Kalash St.  
Pensacola, FL 32507

Susan Walch, PhD (D)  
Dept. of Psychology  
University of West Florida  
11000 University Parkway

Deacon Eugene Pallone (D)  
3215 Bayou Blvd.  
Pensacola, FL 32505  
Pensacola, FL 32514

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