

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N23681

1. Entity Name

HUMAN CRISIS COUNCIL, INC.

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90244 041 ****70.00

Principal Place of Business

Mailing Address

5514 EDGEWATER
ORLANDO FL 32810
US

5514 EDGEWATER
ORLANDO FL 32810-5271
US

2. Principal Place of Business

3. Mailing Address

SAME AS ABOVE

SAME AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2891786

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

PETZOLD, LEW
7122 BETTY ST
WINTER PARK FL 32792

Name

Petzold, LEW

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

5514 Edgewater Drive

City

Orlando

FL

Zip Code

32810

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

Lew Petzold

01/12/00

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 PETZOLD, LEW
STREET ADDRESS 5514 EDGEWATER DR
CITY-ST-ZIP ORLANDO FL ☐ Delete

TITLE D
NAME Dorothy Petzold
STREET ADDRESS 7122 BETTY ST.
CITY-ST-ZIP WINTER PARK, FL 32792 ☐ Change ☒ Addition

TITLE D
NAME MANNING, ROY
STREET ADDRESS 5514 EDGEWATER DR
CITY-ST-ZIP ORLANDO FL 32810 ☒ Delete

TITLE D
NAME Raymond Bassett
STREET ADDRESS 2024 Anderson Place
CITY-ST-ZIP Orlando, FL ☐ Change ☒ Addition

TITLE SD
NAME MILLER, T. JOLENE
STREET ADDRESS 5514 EDEWATER DR.
CITY-ST-ZIP ORLANDO FL ☒ Delete

TITLE D
NAME Sam Roper
STREET ADDRESS 5514 Edgewater Drive
CITY-ST-ZIP Orlando, FL 32810 ☐ Change ☒ Addition

TITLE D
NAME PETZOLD, POLLY A
STREET ADDRESS 5514 EDGEWATER DR
CITY-ST-ZIP ORLANDO FL ☐ Delete

TITLE ☐ Change ☐ Addition

TITLE D
NAME GIDEON, SCOTT
STREET ADDRESS 5514 EDGEWATER DR, APT D
CITY-ST-ZIP ORLANDO FL 32810 ☐ Delete

TITLE ☐ Change ☐ Addition

TITLE D
NAME WARD, WILLIAM J
STREET ADDRESS 4430 NORTH LANE
CITY-ST-ZIP ORLANDO FL 32808 ☐ Delete

TITLE ☐ 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:

Lew Petzold
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/12/00

Date

Daytime Phone #

407/294-4

CR2E037 (9/99)