

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 02, 2002 8:00 am
Secretary of State

0081428

DOCUMENT # N29417

1. Entity Name

CHILD ADVOCATES II OF TALLAHASSEE, INC.

05-29-2002 90727 027 ****61.25

Principal Place of Business

Mailing Address

P.O. BOX 3992
 TALLAHASSEE FL 32315
 US

P.O. BOX 3992
 TALLAHASSEE FL 32315
 US

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

59-2928659

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

O'REILLY, DEBBIE
 332 WINNSTEAD CT
 TALLAHASSEE FL 32312

Name

Russell Danser

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

2916 East Park Ave

City

Tallahassee

FL

Zip Code

32301

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

Russell Danser

Russell Danser

5/16/02

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: 1VPD Delete
 NAME: GRIMM, EMILY
 STREET ADDRESS: 1833 HALSTEAD BLVD #301
 CITY-ST-ZIP: TALLAHASSEE FL 32308

TITLE: President Change Addition
 NAME: Russell Danser
 STREET ADDRESS: 2916 East Park Ave
 CITY-ST-ZIP: Tallahassee, FL 32301 (D)

TITLE: 2VPD Delete
 NAME: RICHMOND, JOANNE
 STREET ADDRESS: 4122 SUGAR BEAR DR
 CITY-ST-ZIP: TALLAHASSEE FL 32311

TITLE: Vice President Change Addition
 NAME: Marty Roberts
 STREET ADDRESS: 8039 Evening Star Lane
 CITY-ST-ZIP: Tallahassee, FL 32312 (D)

TITLE: PD Delete
 NAME: O'REILLY, DEBBIE
 STREET ADDRESS: 332 WINNSTEAD CT
 CITY-ST-ZIP: TALLAHASSEE FL 32312

TITLE: Treasurer Change Addition
 NAME: Harry Redd CPA
 STREET ADDRESS: 5707 Apalachee Pkwy
 CITY-ST-ZIP: Tallahassee, FL 32301 (D)

TITLE: TD Delete
 NAME: O'REILLY, JOHN
 STREET ADDRESS: 332 WINNSTEAD CT
 CITY-ST-ZIP: TALLAHASSEE FL 32312

TITLE: Co-Treasurer Change Addition
 NAME: Amanda Lewis
 STREET ADDRESS: 2106 Joyner Dr.
 CITY-ST-ZIP: Tallahassee, FL 32303 (D)

TITLE: S Delete
 NAME: SCHLAGHECK, DAWN
 STREET ADDRESS: 207 WHETHERBINE RD
 CITY-ST-ZIP: TALLAHASSEE FL 32301

TITLE: Secretary Change Addition
 NAME: Melissa Shaeffer
 STREET ADDRESS: 3001 Greyabby Court
 CITY-ST-ZIP: Tallahassee, FL 32308 (D)

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

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:

Amanda Lewis REQUIP Amanda Lewis

5/16/02

(850) 577-4042

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)