

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N44066

1. Entity Name

NEIGHBORHOOD HOUSING SERVICES OF FORT PIERCE, FL

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

01-19-2000 90213 012 ****61.25

Principal Place of Business

Mailing Address

1203 ORANGE AVENUE
FORT PIERCE FL 34950

1203 ORANGE AVENUE
FORT PIERCE FL 34950-8859



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0269870

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MORRIS, MICHAEL J
1203 ORANGE AVENUE
FORT PIERCE FL 34950

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 | SD FITZGERLAD, JIM 2211 OKEECHOBEE ROAD FT. PIERCE FL | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPD GRISBY, HORATIO 1306 AVENUE "O" FT. PIERCE FL | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SESSIONS, REGINALD P.O. BOX 1480 NA FT. PIERCE FL | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD SPIVEY, KEITH PO BOX 3191 FT PIERCE FL 34948 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D JONES, JAMES 712 BCH CT FT PIERCE FL 34950 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GATES, SUNNY 715 S. INDIAN RIVER DR FT PIERCE FL 34950 | <input type="checkbox"/> Delete |

| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD Brenner, Howard 1630 Seaway Drive #307 Fort Pierce, FL 34948 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Ingram, Dorothy 307 N. 30th Street Fort Pierce, FL 34947 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Simmons, Fred 1402 Avenue G Fort Pierce, FL 34950 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD Hughes, Carol 100 S. 2nd Street Fort Pierce, FL 34950 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Miller, Buck 610 Delaware Avenue Fort Pierce, FL 34950 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Trias, Ramon P.O. Box 1480 Fort Pierce, FL 34954 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael Morris 1-4-00

Date

Daytime Phone #

CR2E037 (9/99)