

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N45715

1. Entity Name

UNITY OF GULF BREEZE, INC.

Principal Place of Business

913 GULF BREEZE PKWY.
HARBOURTOWN 26
GULF BREEZE FL 32561

Mailing Address

913 GULF BREEZE PKWY.
HARBOURTOWN 26
GULF BREEZE FL 32561

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

59-3094021

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

PURCELL, JUDITH A
~~4143 MADURA RAD.~~
GULF BREEZE FL 32561

Name

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

4143 MADURA ROAD

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

Judith A. Purcell Judith A. Purcell

4/16/01

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 D ☐ Delete
NAME ZOKAR, JEANNIE
STREET ADDRESS 150 STERNS
CITY-ST-ZIP GULF BREEZE FL 32561

TITLE ☐ Change ☐ Addition
NAME ZOKAR, JEANNIE
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME WILLIAMS, VIRGINIA
STREET ADDRESS 2341 ARRIVISTE WAY
CITY-ST-ZIP PENSACOLA FL 32504

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE M ☐ Delete
NAME PURCELL, JUDI
STREET ADDRESS 4143 MADURA RD.
CITY-ST-ZIP GULF BREEZE FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME GAINES, WADE
STREET ADDRESS 3534 DELOACH ST
CITY-ST-ZIP PENSACOLA FL 32514

TITLE ☐ Change ☒ Addition
NAME MAIZIE GEORGE
STREET ADDRESS PO BOX 4477
CITY-ST-ZIP PENSACOLA, FL 32507 - 4477

TITLE D ☒ Delete
NAME PENA, MARIA
STREET ADDRESS 171 RAMPART WAY
CITY-ST-ZIP PENSACOLA FL 32505

TITLE ☐ Change ☒ Addition
NAME ORTIZ, NELSON
STREET ADDRESS PO BOX 16361
CITY-ST-ZIP PENSACOLA, FL 32507 - 6361

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:

MAIZIE GEORGE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/01

Date

Daytime Phone #

CR2E037 (10/00)