

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90323 003 ****70.00

DOCUMENT # N930000000004

1. Entity Name

HUMAN SERVICES FOUNDATION, INC.

Principal Place of Business

Mailing Address

~~1500 MATTHEW DR~~
~~STE D~~
FORT MYERS FL ~~33907~~
US

~~1500 MATTHEW DR~~
~~STE D~~
FORT MYERS FL ~~33907~~
US

2. Principal Place of Business

2421 East Mall Drive

3. Mailing Address

2421 East Mall Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0389474

Applied For

Not Applicable

Zip

33901

Country

Zip

33901

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

~~BRENNER-MORRIS, BEVERLY~~
~~1500-D MATTHEW DRIVE~~
FORT MYERS FL ~~33907~~

Name

Beverly J. Brenner

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

2421 East Mall Drive

City

Fort Myers

FL

Zip Code

33901

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]

BJ Brenner, Ex Dir

01/23/01

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
NAME
STREET ADDRESS
CITY-ST-ZIP
ED
BRENNER-MORRIS, BEVERLY J.
1500-D MATTHEW DRIVE
FORT MYERS FL 33907 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Brenner, Beverly J.
2421 East Mall Drive
Fort Myers FL 33901 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CLARK, DAWN
17211 CALOWSA TRACE CIRCLE
FORT MYERS FL 33912 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Knapp, Cecil
3542 Whipporwhill Blvd
Punta Gorda FL 33950 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MCDONALD, WALTER
6553 HIGHLAND PINES CIRCLE
FT MYERS FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Brenner, Jane
4 Ocean Drive
Punta Gorda FL 33950 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
BP
ANDERSON, CYNTHIA
6296 CORPORATE COURT STE B101
FT. MYERS FL 33919 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Barrett, Barbara
Rio de Palermo Ct
Punta Gorda FL 33950 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BROWN, STACEY
1484 BRAMAN AVENUE
FT MYERS FL 33901 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
KNAPP, JUDY
3542 WHIPPORWHILL BLVD
PUNTA GORDA FL 33950 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/01

Date

941-931-0706

Daytime Phone #

CR2E037 (10/00)