2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State
02-17-2003 90168 024 ****70.00

DOCUMENT # N94000005229

1. Entity Name
LAKE OKEECHOBEE RURAL HEALTH NETWORK, INC.

Principal Place of Business	Mailing Address
185 US HWY 27 S. S. BAY FL 33493 US	P.O. BOX 881 S. BAY FL 33493 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
185 US Highway 27 S	P.O. Box 881
Suite, Apt. #, etc. —	Suite, Apt. #, etc. —
City & State: South Bay, FL	City & State: South Bay, FL 33493-0881
Zip: 33493 Country: Palm Beach	Zip: 3349 Country:

4. FEI Number 65-0661240 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KLEIN, RONALD J
SACHS & SAX, P.A.
301 YAMATO ROAD, SUITE 4150
BOCA RATON FL 33431

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C BROWN, EDWIN 4450 S. TIFFANY DRIVE WEST PALM BEACH FL	☐ Delete	Director Maureen Ferguson 185 US Highway 27 S. South Bay, FL 33493	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PURCELL, JAMES 1201 S MAIN ST BELLE GLADE FL 33430	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S AMATO, JOSEPH 1024 NW AVE D BELLE GLADE FL 33430	☑ Delete Keep @		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VALIANT, MARTHA 100 EL PASO CLEWISTON FL 33440	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GONZALEZ, JOSEPH 500 W SUGARLAND HIGHWAY CLEWISTON FL 33440	☑ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BEHRMAN, ANDREW J 185 US HIGHWAY 27 S SOUTH BAY FL 33493	☑ Delete		☐ Change ☐ Addition

CR2E037 (10/02)

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: Maureen Ferguson REQ Maureen Ferguson (561) 993-1269
Date Daytime Phone #

Attachment

70-

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90027727

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☒ CHECK HERE IF MAKING CHANGES

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Same as above	Same as above
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country: United States	Zip / Country: United States

4. FEI Number: 65-0661240 ☐ 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
KLEIN, RONALD J SACHS & SAX, P.A. 301 YAMATO ROAD, SUITE 4160 BOCA RATON, FL 33431	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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SIGNATURE _____ DATE
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C BROWN, EDWIN 4450 S. TIFFANY DRIVE WEST PALM BEACH, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Sandra Chamblee, 136 N. Main Street Belle Glade, FL 33430 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PURCELL, JAMES 1201 S MAIN ST BELLE GLADE, FL 33430	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Robert Trenschel, 38754 SR 80 Belle Glade, FL 33430 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	$ Vice-Chair AMATO, JOSEPH 1024 NW AVE D BELLE GLADE, FL 33430	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Executive Director Maureen Ferguson, 185 US Highway 27 S. South Bay, FL 33493 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VALIANT, MARTHA 100 EL PASO CLEWISTON, FL 33440	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Joseph Peters, 4411 Beacon Cir #3 West Palm Beach, FL 33407 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GONZALEZ, JOSEPH 600 W SUGARLAND HIGHWAY CLEWISTON, FL 33440	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BEHRMAN, ANDREW J 185 US HIGHWAY 27 S SOUTH BAY, FL 33493	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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SIGNATURE: Maureen Ferguson Maureen Ferguson 2/12/03 (561) 993-1269
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) (Date) (Daytime Phone #)