## 2002 UNIFORM BUSINESS REPORT (UBR)

## Mar 29, 2002 8:00 am 8 DOCUMENT # N95000002348 **Secretary of State** 1. Entity Name 03-29-2002 91426 018 \*\*\*\*70.00 SARASOTA COUNTY COALITION FOR THE HOMELESS, INC. Mailing Address Principal Place of Business 507 KUMQUAT COURT P O BOX 3626 SARASOTA FL 34280 SARASOTA FL 34236 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 501 Kunguat \_4. FEI Number Applied For 65-0585396 Not Applicable Sarasuka ountry Zip 3 4236 Country \$8.75 Additional 5. Certificate of Status Desired 34236 Sorasola Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Jacqueline F. Adams Street Address (2.0. Box Number is Not Acceptable) KYLLONEN, ROBERT P 507 KUMQUAT COURT SARASOTA FL 34236 Zip Code Sarasola 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. JAcqueline SIGNATURE . Signature: typed printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change ☐ Addition TITLE DDE ☐ Delete Dan Dunn COOPER-RONEY, LINDA NAME NAME 417 Cottleman Rd. STREET ADDRESS STREET ADDRESS 3304,27TH PARKWAY CITY-ST-ZIP CITY-ST-ZIP Sarasola, Fl SARASOTA FL 34235 ☐ Addition Change TITLE ☐ Delete TITLE Tom TreeND **NEVADO, FRANCES SIS** NAME NAME 1084 S. BrINKS AUC. STREET ADDRESS STREET ADDRESS 1670 4TH STREET CITY-ST-ZIP CITY-ST-ZIP Sarasata SARASOTA FL 34236 34237 ☐ Delete ☐ Change ☐ Addition TITLE TITLE Ellen MeLaughlin 1424 4th St. BACON, EULA NAME NAME STREET ADDRESS STREET ADDRESS 1445:2ND.STREET .: Drosota, F234236 CITY-ST-ZIP SARASOTA FL 34236 CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Maynard Stringer TREEND, TOM NAME NAME STREET ADDRESS STREET ADDRESS 2400 COLSON AVENUE <u>Saraseta, FL. 34232</u> CITY-ST-7IP CITY-ST-ZIP SARASOTA FL 34234 ☐ Delete Change Addition TITLE Jacqueune F. Adams KYLLONEN, BOB NAME NAME 4405 DeSot- Rd. STREET ADDRESS STREET ADDRESS 507 KUMQUAT COURT prasota, FL 34235 CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34236 ☐ Change ☐ Addition TITLE ☐ Delete TITLE Sandy Baar 501 Kunguat Ct. NAME NAME

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. 914.355.8

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE

STREET ADDRESS CITY-ST-7IP

F. Galania E. TACQUELLNE F. Adans 3/14/02

Salasula, FL

Daytime Phone #

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