

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000005230

1. Entity Name

P.A.T.S. PREGNANT ADOLESCENT TEEN SERVICES, INCO

FILED
May 07, 2000 8:00 am
Secretary of State

05-07-2000 90037 039 ****61.25

Principal Place of Business

Mailing Address

P O BOX 11442
 DAYTONA BEACH FL 32120-1442
 US

P O BOX 11442
 DAYTONA BEACH FL 32120-1442
 US

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

59-3373181

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

GREEN, PEARL WALKER
 836 PINWOOD STREET
 DAYTONA BEACH FL 32114

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

Pearl Walker-Green

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

March 15, 00

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 ☐ Delete
 NAME D
 STREET ADDRESS GREEN, PEARL WALKER
 CITY-ST-ZIP P O BOX 11442 N/A
 DAYTONA BEACH FL 32119

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

TITLE ☐ Delete
 NAME D
 STREET ADDRESS KILLINS, LARRY
 CITY-ST-ZIP P O BOX 11442 N/A
 DAYTONA BEACH FL 32119

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

TITLE ☐ Delete
 NAME DT
 STREET ADDRESS SCOTT, URSULA
 CITY-ST-ZIP P O BOX 11442 N/A
 DAYTONA BEACH FL 32120

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

TITLE ☐ Delete
 NAME S
 STREET ADDRESS COLSTON, MICHELLA
 CITY-ST-ZIP P O BOX 11442 N/A
 DAYTONA BEACH FL 32119

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

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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 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:

Pearl Walker-Green

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 15, 00

Date

Daytime Phone #

CR2E037 (9/99)