

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000003993

1. Entity Name

THE WESTCOAST CENTER FOR HUMAN DEVELOPMENT OF GA

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90019 010 ****61.25

Principal Place of Business

6529 NW 39TH AVE
GAINESVILLE FL 32606
US

Mailing Address

PO BOX 2554
GAINESVILLE FL 32602-2554
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

P.O. BOX 357234

Suite, Apt. #, etc.

City & State
GAINESVILLE, FLORIDA

Zip

32635-7234

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3391905

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COWART, JOHN S
1306 NW 99TH TER.
GAINESVILLE FL 32606

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.

SIGNATURE

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

TITLE D ☐ Delete
NAME STUBBS, PATRICIA A
STREET ADDRESS 5922 NW 27 TERR
CITY-ST-ZIP GAINESVILLE FL 32653

TITLE V ☐ Delete
NAME COWART, JOHN S
STREET ADDRESS 1306 NW 99TH TERR
CITY-ST-ZIP GAINESVILLE FL

TITLE S ☐ Delete
NAME WALKER, BRIDGET L
STREET ADDRESS 5922 NW 27TH TER.
CITY-ST-ZIP GAINESVILLE FL

TITLE T ☐ Delete
NAME FLEMING, WALTER L
STREET ADDRESS 3005 NW 76TH TERR
CITY-ST-ZIP GAINESVILLE FL

TITLE D ☐ Delete
NAME MURRAY, WALLACE T
STREET ADDRESS 403 N. WASHINGTON BLVD
CITY-ST-ZIP SARASOTA FL 34236

TITLE P ☐ Delete
NAME PORTER, HENRY L
STREET ADDRESS 403 N. WASHINGTON BLVD
CITY-ST-ZIP SARASOTA FL 34236

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME GREENE, ANTHONY F
STREET ADDRESS 7604 NW 37 PLACE
CITY-ST-ZIP GAINESVILLE, FL 32606

TITLE S ☒ Change ☐ Addition
NAME STOKES, BRIDGET L, WALKER
STREET ADDRESS 2346 SW 34 PLACE
CITY-ST-ZIP GAINESVILLE, FL 32608

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

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

TITLE ☐ Change ☐ Addition
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:

Anthony Greene
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Anthony Greene 4/15/00 352-392-1161
Date Daytime Phone #

CR2E037 (9/99)