

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000004199

1. Entity Name

COUNCIL OF SERVICE ORGANIZATIONS OF UPPER PINELL

Principal Place of Business

C/O THE LONG CENTER
1501 N. BELCHER RD. STE 225
CLEARWATER FL 34625

Mailing Address

C/O THE LONG CENTER
1501 N. BELCHER RD. STE 225
CLEARWATER FL 33765-1339

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

59-3404606

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

LEIBY, CARL R
2287 PHILIPPINE DR
#67
CLEARWATER FL 33763

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME WARD, HOWARD
STREET ADDRESS 2329 LORENA LANE
CITY-ST-ZIP CLEARWATER FL 34625

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

TITLE D ☐ Delete
NAME MELKONIAN, DODGE
STREET ADDRESS 2712 REDFORD COURT
CITY-ST-ZIP CLEARWATER FL 34621

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

TITLE V ☐ Delete
NAME MORSON, BETTY J
STREET ADDRESS 1436 BYRAM DRIVE
CITY-ST-ZIP CLEARWATER FL 34615

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

TITLE S ☐ Delete
NAME POSTON, JANE H
STREET ADDRESS 1027 DOGWOOD DRIVE
CITY-ST-ZIP DUNEDIN FL 34698

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

TITLE T ☐ Delete
NAME LEIBY, CARL R
STREET ADDRESS 2287 PHILIPPINE DR #67
CITY-ST-ZIP CLEARWATER FL 33763

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

TITLE P ☒ Delete
NAME BOLSTER, RICHARD E
STREET ADDRESS 415 HARBOR VIEW LANE
CITY-ST-ZIP LARGO FL 34640

TITLE ☐ Change ☒ Addition
NAME PRESIDENT
STREET ADDRESS JIM GREINER
CITY-ST-ZIP 2113 POINCIANA TER.
CLEARWATER, FL. 33760

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-2000

(727) 791-3861

Date

Daytime Phone #

CR2E037 (9/99)