

2002 UNIFORM BUSINESS REPORT (UBR)

2/

FILED
Apr 09, 2002 8:00 am
Secretary of State

02-19-2002 90008 028 ****61.25

DOCUMENT # N96000004199

1. Entity Name

COUNCIL OF SERVICE ORGANIZATIONS OF UPPER PINELLAS, INC.

Principal Place of Business

Mailing Address

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

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

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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 fee applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Carl R Leiby

1-30-02

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 1st VICE PRESIDENT ☐ Change ☒ Addition
NAME DICK BOLSTER
STREET ADDRESS 415 HARBOR LN. VIEW
CITY-ST-ZIP LARGO, FL. 33770

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

TITLE D ☐ Change ☒ Addition
NAME KAY HOLLEY
STREET ADDRESS 1251 GREENWOOD AVE. S.
CITY-ST-ZIP GREEN, CLEARWATER, FL. 33756

TITLE P ☐ Delete
NAME MARIAN, RAYMOND
STREET ADDRESS 1498 FAIRWAY DR.
CITY-ST-ZIP DUNEDIN FL 34698

TITLE D ☐ Change ☒ Addition
NAME JUDY PRICE
STREET ADDRESS 606-3RD ST. N.
CITY-ST-ZIP CLEARWATER, FL. 33759

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

TITLE D ☐ Change ☒ Addition
NAME WILLIAM KUNZE
STREET ADDRESS 1396 LEMON CT.
CITY-ST-ZIP CLEARWATER, FL. 34683

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 2VP ☐ Delete
NAME GARINER, JIM
STREET ADDRESS 2113 POINCIANA TER
CITY-ST-ZIP CLEARWATER FL 33760

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 fees empowered.

SIGNATURE:

Carl R Leiby

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-02

Date

(227) 791-3961

Overtime Phone #

CR2E037 (9/01)