## 2000 UNIFORM BUSINESS REPORT (UBR)

## Feb 24, 2000 08:00 AM DOCUMENT # N9700000403 1. Entity Name **Secretary of State** LAS BRISAS NEIGHBORHOOD COMMUNITY WATCH, INC. Principal Place of Business Mailing Address 3070 BENT OAK ROAD 3070 BENT OAK ROAD FL PENSACOLA FL PENSACOLA 32526 32526 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3449855 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name 3070 BENT OAK ROAD Street Address (P.O. Box Number is Not Acceptable) PENSACOLA FL32526 Zip Code FL 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. 02/24/2000 **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) ญ็หญ่≥าเก็ ก็เรียกได้ FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delate TD TITLE T/D ☐ Addition NAME YOUNG EARNEST P NAME SIMMONS EARNEST STREET ADDRESS 3000 PANAMA DR STPEET ADDRESS 3000 PANAMA DR CITY-ST-ZIP PENSACOLA FL32526 CITY-ST-7IP PENSACOLA FL32526 TITLE ☐ Delete VD V/D | Change ☐ Addition NAME FORD DEBBIE NAME DAVIS MARY STREET ADDRESS 3225 LAS BRISAS DR STREET ADDRESS 3025 ENGLISH OAK CIR CITY-ST-ZIP PENSACOLA 32526 CITY-ST-ZIP PENSACOLA $\mathbf{FL}$ 32526 TITLE ☐ Delete TITLE SD S/D X Change Addition NAME NAME KLING STEVEN PEACH ERNEST STREET ADDRESS 3021 ENGLISH OAK CIR 7190 PRINCESS LN STREET ADDRESS CITY-ST-ZIP PENSACOLA FL. 32526 CITY-ST-7IP PENSACOLA $\mathbf{FL}$ 32526 TITLE PD ☐ Delete TITLE P/D XI Change ☐ Addition NAME LEE WILLIAM FORD DEBBIE 3225 LAS BRISAS DR STREET ADDRESS 3070 BENT OAK ROAD STREET ADDRESS CITY-ST-ZIP PENSACOLA 32526 CITY-ST-ZIP PENSACOLA 32526 TITLE ☐ Delete TID F Change ☐ Addition NAME NAR/F STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change | ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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CITY-ST-ZIP

<sup>12.</sup> 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.