

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000001955

1. Entity Name

YOUTH WITH A VISION INCORPORATED

FILED
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90151 005 ****61.25

Principal Place of Business

8114 N HALE AVE
TAMPA FL

Mailing Address

8114 N HALE AVE
TAMPA FL

2. Principal Place of Business

2511 N. GRADY AVE.

3. Mailing Address

2511 N. GRADY AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA, FL

City & State

TAMPA, FL

4. FEI Number

59-3558076

Applied For

Not Applicable

Zip

33607

Country

USA

Zip

33607

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MALLAN, ROBERT J
8114 N HALE AVE
TAMPA FL

7. Name and Address of New Registered Agent

Name ROBERT J. MALLAN JR.

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

2511 N. GRADY AVE.

TAMPA

33607

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

7/12/2000

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

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 PD
NAME MALLAN, ROBERT J
STREET ADDRESS 8114 N HALE AVE
CITY-ST-ZIP TAMPA FL ☐ Delete

TITLE D
NAME FOUNTAIN, JAMES DR
STREET ADDRESS 12318 WYCLIFF PLACE
CITY-ST-ZIP TAMPA FL 33626 ☒ Delete

TITLE VD
NAME WHITE, RANDY A DR
STREET ADDRESS 4110 HIGHLAND PARK CIR
CITY-ST-ZIP LUTZ FL 33549 ☐ Delete

TITLE STD
NAME GEE, DEBBIE
STREET ADDRESS 1205 GULFWAY
CITY-ST-ZIP ST PETERSBURG FL 33706 ☐ Delete

TITLE D
NAME SANDS, ARTHURLEY
STREET ADDRESS 529 S PARSONS AVE #1503
CITY-ST-ZIP BRANDON FL 37511 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE D
NAME JENNIFER MALLAN
STREET ADDRESS 2511 N. GRADY AVE.
CITY-ST-ZIP TAMPA, FLA. 33607 ☒ Change ☒ Addition

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

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

TITLE
NAME SUZANNE MORGAN
STREET ADDRESS 3202 COLWELL CT. #2207
CITY-ST-ZIP TAMPA, FLA. 33614 ☒ Change ☐ Addition (D)

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

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

Date

Daytime Phone #

7/12/2000 (813) 879-4673 x256

CR2E037 (5/00)