## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Jul 10, 2001 8:00 am DOCUMENT # N98000002629 **Secretary of State** 07-10-2001 90115 005 \*\*\*\*70.00 NO MORE SILENCE, INC. Principal Place of Business Mailing Address 1900 PENNSYLVANIA AVE NE 1900 PENNSYLVANIA AVE NE SAINT PETERSBURG FL 33703 SAINT PETERSBURG FL 33703 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3502989 Not Applicable Zip Country\_\_\_ \$8.75 Additionals 5. Certificate of Status Desired . 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) MCCORMICK, MAUREEN 1900 PENNSYLVANIA AVE NE SAINT PETERSBURG FL 33703 Zip Code City 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State After September 12, 2001, min. will be \$236.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Addition TITLE ☐ Change TITLE ☐ Delete LESCHEN, CHRISTY NAME NAME 1105 HUNT AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKELAND FL 33801 CITY-ST-ZIP Change ☐ Addition TITLE TITLE ☐ Delete MCCORMICK, MAUREEN NAME NAME 1900 PENNSYLVANIA AVE NE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG FL 33703 CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete ROCKEY, MARSHA NAME NAME 1900 PENNSYLVANIA AVE NE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG FL 33703 CITY-ST-ZIP Change ☐ Delete ☐ Addition TITLE TITLE SAFFORD, LAURA NAME NAME STREET ADDRESS 1105 HUNT AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33801 Change ☐ Addition TITLE ☐ Delete TITLE THIELMANN, LINEA THIELMANN, LINDA NAME NAME 5928 TANGLEWOOD DR NE ST. PEXCESBURG, FL 33703 615 W VIRGINIA AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33603** ☐ Change ☐ Addition TITLE ☐ Delete TITLE BARRON, JANICÉ NAME NAME STREET ADDRESS 6001 19TH ST NE STREET ADDRESS

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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:** 

SAINT PETERSBURG FL 33703

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**FILED**