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

## Jun 01, 2001 8:00 am Secretary of State DOCUMENT # N98000004185 06-01-2001 90001 042 \*\*\*\*61.25 NEIGHBORHOOD PRIDE, INC. Principal Place of Business Mailing Address 4 ALUV 1004 OAKTREE LANE 1004 OAKTREE LANE DELAND FL 32720 DELAND FL 32720 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3525305 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) KRAWCZYNSKI, STEPHANIE 1004 OAKTREE LANE DELAND FL 32720 City 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. (NO1: Registered Agent signature required when reinstating) DATE 9. Election Campaigr Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. PD TITLE ☐ Addition TITLE ☐ Delete KRAWCZYNSKI, STEPHANIE NAME NAME 1004 OAKTREE LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DELAND FL 32720 CITY-ST-ZIP Delete Change ☐ Addition TITLE TITI F Hill, bazie YOUNG, VICTORIA NAME NAME 1200 S. Courtland Blud. 800 VALLEYDALE AVE STREET ADDRESS STREET ADDRESS DEHona, Th 32725 CITY-ST-ZIP DELAND FL 32720 CITY-ST-ZIP ☐ Delete Change ■ Addition TITLE JEFFERS, TAMESHIA NAME NAME 3241 TALLWOOD DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DELTONA FL 32725** ☐ Delete TITLE ☐ Change Addition TITLE BARON, MELLIE NAME NAME 800 LONGVIEW AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DELAND FL 32720 TITLE ☐ Delete TITLE ☐ Change ☐ Addition GLENN, BILLY NAME NAME **801 VALLEYDALE AVE** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DELAND FL 32720 TITLE ☐ Delete TITLE Change Addition MARTIN, HENRY NAME NAME STREET ADDRESS P.O. BOX 3508 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DELAND FL

12. I hereby certify that the information supplied with this filing does not qualify further 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

phane Krowcaynski