

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000007192

1. Entity Name

CHILDREN'S HOME SOCIETY SERVICES OF NORTH FLORID

Principal Place of Business

Mailing Address

820 E. PARK AVE., BLDG. E #100
TALLAHASSEE FL 32301

820 E. PARK AVE., BLDG. E #100
TALLAHASSEE FL 32301

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

59-3618586

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

HAINES, JOHN
8570 TRAM RD.
TALLAHASSEE FL 32301

Name John Haines

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

820 E. Park Ave., Bldg E #100

City

Tallahassee,

FL

Zip Code
32301

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

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 HAINES, JOHN
STREET ADDRESS 8570 TRAM RD.
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☒ Change ☐ Addition
NAME John Haines
STREET ADDRESS 820 E. Park Ave, Bldg. E #100
CITY-ST-ZIP Tallahassee, Florida 232301

TITLE D ☐ Delete
NAME BUTLER, DAN
STREET ADDRESS 19 BUFFALO MEADOW LN.
CITY-ST-ZIP PALM COAST FL

TITLE ☒ Change ☐ Addition
NAME Dan Butler
STREET ADDRESS 820 E. Park Ave., Bldg. E, #100
CITY-ST-ZIP Tallahassee, Florida 32301

TITLE D ☐ Delete
NAME BUNDY, DAVID
STREET ADDRESS 360 EAGLE CREEK RD.
CITY-ST-ZIP LAKE MARY FL

TITLE ☒ Change ☐ Addition
NAME David Bundy
STREET ADDRESS 820 E. Park Ave., Bldg. E #100
CITY-ST-ZIP Tallahassee, Florida 32301

TITLE D ☐ Delete
NAME CARROLL, MARGARET
STREET ADDRESS 4124 BALTIC ST.
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☒ Change ☐ Addition
NAME Margaret Carroll
STREET ADDRESS 820 E. Park Ave., Bldg. E, #100
CITY-ST-ZIP Tallahassee, Florida 32301

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 like empowered.

SIGNATURE:

MARGARET CARROLL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/00

Date

904 348-2840

Daytime Phone #

CR2E037 (9/99)

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90043 019 ****70.00



DO NOT WRITE IN THIS SPACE