

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P18968** **AMENDED**

1. Entity Name

Cross Country Home Services, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

00 OCT 20 PM 5:33

Principal Place of Business
**1625 NW 136th Ave, Ste. 200
Ft. Lauderdale, FL 33323**

Mailing Address
**P.O. Box 551540
Ft. Lauderdale, FL 33355**

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0033743

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**Cynthia J. Starrett
1625 NW 136th Ave, Ste. 200
Ft. Lauderdale, FL 33323**

7. Name and Address of New Registered Agent
Name **Robert Judges**
Street Address (P.O. Box Number is Not Acceptable)
1625 NW 136th Ave, Ste. 200
City **Ft. Lauderdale** **FL** Zip Code **33323**

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 **Robert Judges**
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

10/12/00
DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Kenneth G. Harthausen 1625 NW 136th Ave, Ste. 200 Ft. Lauderdale FL 33323 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Haward L. Wolk 1625 NW 136th Ave, Ste. 200 Ft. Lauderdale FL 33323 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Cynthia J. Starrett 1625 NW 136th Ave, Ste. 200 Ft. Lauderdale FL 33323 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sandra C. Finn 1625 NW 136th Ave, Ste. 200 Ft. Lauderdale FL 33323 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	L. Ashley Cole 1625 NW 136th Ave, Ste. 200 Ft. Lauderdale FL 33323 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	David Broyles 1625 NW 136th Ave, Ste. 200 Ft. Lauderdale FL 33323 <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Robert Judges 1625 NW 136th Ave, Ste. 200 Ft. Lauderdale FL 33323 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	8000003447728--3 -11/01/00--0110-011 *****61.25 *****61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	10/30

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE **Robert Judges** **Robert Judges, Secy/Treas** **10/12/00** **954-836-1900**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #