

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT.# P38361

1. Entity Name

THE NATIONAL COUNCIL ON PROBLEM GAMBLING, INC.



FILED
Jun 13, 2000 8:00 am
Secretary of State

06-13-2000 90008 005 ****70.00

Principal Place of Business

Mailing Address

10025 GOV WARFIELD PKWY
STE 311
COLUMBIA MD 21044
US

10025 GOV WARFIELD PKWY
STE 311
COLUMBIA MD 20002-4328
US

2. Principal Place of Business

3. Mailing Address

202 G St, NE

202 G St, NE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Washington, DC

City & State

Washington DC

Zip

20002

Country

US

Zip

20002

Country

US

4. FEI Number

51-0141872

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

FLORIDA COUNCIL ON COMPULSIVE GAMBLING, INC
1180 SPRING CENTER SOUTH BLVD
STE 390
ALTAMONTE SPRINGS FL 32714

Name

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

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

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
NAME
STREET ADDRESS
CITY-ST-ZIP
EVP
FRANKLIN, JOANNA
10025 GOV WARFIELD PKWY STE 311
COLUMBIA MD

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PC
Charles Maurer
1001 Broadway, Ste 315
Seattle, WA 98182

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PC
ASHE, PAUL R
1180 SPRING CENTER SOUTH BLVD., 390
LONGWOOD FL 32714

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVP
Carol O'Hare
3006 S. Maryland Pkwy, Ste 405
Las Vegas, NV 89109

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
PERTZOFF, ELIZABETH
100 W 10TH ST., STE 303
WILMINGTON DE 19801

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SUPO
Betty Greer
440 Bounds St, Ste G
Jackson, MS 39206

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVPD
MARVIN STEINBERG
15 BROAD ST
NEW LONDON CT

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
marviss Steinberg
47 Clapboard Hill Rd, Ste G
Guilford, Ct 06437

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
JACOBS, DURAND F P
432 E CRESCENT AVE
REDLANDS CA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ELIZABETH PERTZOFF, TREASURER 6-5-00 302-655-3261

CR2E037 (9/99)