


DOCUMENT # P97000027442

1. Entity Name

SOUTHEAST SERVICES OF PINELLAS COUNTY, INC.

00023223



| | |
|------------------------------------------------|------------------------------------------------|
| Principal Place of Business | Mailing Address |
| 7663 17TH AVE. NORTH ST PETERSBURG FL 33710 | 7663 17TH AVE. NORTH ST PETERSBURG FL 33710 |

| | | |
|----------------------------------|--------------------------|---------------------------------------|
| 4. FEI Number | 59-3434150 | Applied For |
| | | Not Applicable |
| 5. Certificate of Status Desired | <input type="checkbox"/> | \$8.75 Additional Fee Required |

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 _____

| 11. OFFICERS AND DIRECTORS | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|----------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PTSD DENNIS, RHETT G 7663 17TH AVE. NORTH ST PETERSBURG FL 33710 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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SIGNATURE: ~~[Signature]~~ RHETT DENNIS 3/20/01 (727) 536-4546
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)