

2000 UNIFORM BUSINESS REPORT (UBR)

56

FILED
Aug 01, 2000 8:00 am
Secretary of State

05-23-2000 90251 038 ***150.00

DOCUMENT # P98000067247

1. Entity Name

SENIOR OUTREACH SERVICES, INC. *R*

Principal Place of Business
2536 COUNTRYSIDE BLVD.
CLEARWATER FL 33763

Mailing Address
2536 COUNTRYSIDE BLVD.
CLEARWATER FL 33763-1633

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

59-3653927

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

BOUDNA, HEATHER L
2536 COUNTRYSIDE BLVD.
CLEARWATER FL 33763

Name
MAURY R. THORNTON
Street Address (P.O. Box Number is Not Acceptable)
2536 COUNTRYSIDE BLVD.
10th FLOOR
City
Clearwater FL Zip Code
33763

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 fee is applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7/25/00

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	<i>BOESCH, GARY R</i>	☒ Delete
NAME	<i>BOESCH, GARY R</i>	
STREET ADDRESS	<i>2536 COUNTRYSIDE BLVD</i>	
CITY-ST-ZIP	<i>CLEARWATER FL 33763</i>	
TITLE	<i>POST</i>	☐ Delete
NAME	<i>BOESCH, GARY R</i>	
STREET ADDRESS	<i>2536 COUNTRYSIDE BLVD. 6TH FL</i>	
CITY-ST-ZIP	<i>CLEARWATER FL 33763</i>	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

GARY R Boesch
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GARY R Boesch 3/23/00 727-726-0726

Date

Daytime Phone #

CR2E004 (9/99)