

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V41859

1. Entity Name:

Ameri-Life & Health Services of Greenville, Inc.

Principal Place of Business

2536 Countryside Blvd 6th Floor

Mailing Address

2536 Countryside Blvd

Sixth Floor

Clearwater FL 33763

Clearwater FL 33763

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

59-3143408

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Thornton, R. Maury
2536 Countryside Blvd
Sixth Floor
Clearwater FL 33763

Name Shatanoff, Robert Harry
Street Address (P.O. Box Number is Not Acceptable)
2536 Countryside Blvd,
Sixth 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  Robert Harry Shatanoff
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling)

7-13-01
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, 2001 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 PS
NAME Boegch, Gary
STREET ADDRESS 2536 Countryside Blvd 6th Floor
CITY-ST-ZIP Clearwater FL 33763 ☒ Delete

TITLE ST
NAME Thornton, R. Maury
STREET ADDRESS 2536 Countryside Blvd
CITY-ST-ZIP Clearwater FL 33763 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME Davison, Floyd
STREET ADDRESS 2536 Countryside Blvd 6th Fl
CITY-ST-ZIP Clearwater FL 33763 ☐ Change ☒ Addition

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
100004510731-4
-08/01/01--01017--025
*****97.50 *****62.50

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

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

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

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:  FLOYD DAVISON

June 25, 2001

(727) 726-0726

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 JUL 17 AM 11:43

CD05024 11/1/01

Requester's Name
Address
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. (Corporation Name) (Document #)
2. (Corporation Name) (Document #)
3. (Corporation Name) (Document #)
4. (Corporation Name) (Document #)

☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

AMENDMENTS

☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

300004510729--0
-08/01/01--01017--025
*****97.50 *****35.00

Examiner's Initials

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of section 607.0502 or 607.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida, submits the following statement in order to change its registered office or registered agent, or both in the State of Florida.

1. The name of the Corporation is: Ameri-Life Health & Services of Greenville, Inc.

1a. Date of Incorporation: 6/5/92 Document Number: V41859


2. The name and address of the current registered agent and office:

R. Maury Thornton
2536 Countryside Blvd. 6th Floor
Clearwater, FL 33773

3. The name and address of the new registered agent and office:


Robert Harry Shatanoff
2536 Countryside Blvd. 6th Floor
Clearwater, FL 33773

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the Board.


Floyd Davison
Director

Date: June 25, 2001

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.


Robert Harry Shatanoff
Date: June 25, 2001