## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 704737**

1. Entity Name

THE GREATER MAITLAND CIVIC CENTER, INC.



FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 91388 044 \*\*\*\*61.25

### Principal Place of Boarness ### Address ### Addres					WE TO					
PO BOX 941124 MATLAND FL 32794 US  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Ci	Principal Plac	e of Business	Mailing Address			_				
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Security   Zip   Country   S. Certificate of Status Desired   \$8.75 Additional Fee Recyclind   \$8	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
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8. Name and Address of New Registered Agent  Name GLEM E. SULCART JA  Street Lights Note of the State of Florida. Tan International State  BONE, DARCY 2501 MACBETH AVENUE MATILAND FL 32751  8. Tre above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  SIGN	Zip	Country	Zip Countr		try	5. Certificate of State	us Desired 🔲	<b>\$8.75</b> Ad	ditional	
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BONE, DARCY 2501 MACBETH AVENUE MATILAND FL 32751  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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  SIGNATURE  FILE NOW: FEE IS \$61.25  9. Election Campaign Financing Trust Fund Contribution.  SIGNATURE  FILE NOW: FEE IS \$61.25  9. Election Campaign Financing Trust Fund Contribution.  TITLE  PRESIDENT  STOVER, PAT  SITURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  OFFICERS AND DIR		o. Name and Address of Carrent	registered Agent		Name Cic					
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12. Thereby 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		<u> </u>	this filing does not qualify for			ection 119.07(3)(i), Florid	da Statutes. I further o	ertify that the in	nformation	

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 REQUIRED Gradow 2 nither