## **2000 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## DOCUMENT # **706943** Apr 12, 2000 8:00 am Secretary of State 1. Entity Name WEST COAST SQUARE AND ROUND DANCERS ASSOCIATION. 04-12-2000 90178 007 \*\*\*\*61.25 Principal Place of Business Mailing Address 675 BEAR CREEK DR. 675 BEAR CREEK DR. BARTOW FL 33830 BARTOW FL 33830-3220 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-2145982 Not Applicable Zip\_\_\_ Country Zip Country \$8.75 Additional Certificate of Status Desired — Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BouseMan Street Address (P.O. Box Number is Not Acceptable) APPEL, WILLIAM J 4429 VIEUX CARRE CIRCLE 1084 Lane Morth **TAMPA FL 33613** 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 ped or printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Change Change Addition TITLE ☐ Delete TITLE SLOCUM, DONald NAME APPEL, WILLIAM 675 Bearcreek QB. STREET ADDRESS STREET ADDRESS 4429 VIEUX CARRE CIR BarTow, FL 33830 CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33613** Change Addition Delete TITLE Appel, William BRÔWN, KEN NAME NAME 4429 VIEUX Carre Cir. STREET ADDRESS STREET ADDRESS 50 COE RD #222 \_ Tampa, 71 33613 CITY-ST-ZIP CITY-ST-ZIP BELLEAIR FL ☐ Delete TITLE ☐ Change **Addition** TITLE Paula Bouseman NAME NAME SLOCUM, DONALD 5125 68 Th Lane North STREET ADDRESS STREET ADDRESS 675 BEARCREEK DR. ST. PETERSburg 71 33709 CITY-ST-ZIP CITY-ST-ZIP BARTOW FL 33830 ☐ Delete TiT! F ☐ Change Addition TITLE RoberT Courter NAME NAME 14962 Crown Dr. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Largo 71, 33724 CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

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