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

DOC	JMENT #	7 (06943

1. Entity Name

WEST COAST SQUARE AND ROUND DANCERS ASSOCIATION,



FILED

Secretary of State

02-17-2003 90206 050 ****61.25

Feb 17, 2003 8:00 am

Principal Place of Business Mailing Address 5133 68TH LANE N 5133 68TH LANE N SAINT PETERSBURG FL 33709 SAINT PETERSBURG FL 33709 2. Principal Place of Business 3. Mailing Address 760 Pleāšāntview Drvi 760 Pleasantview Dr. Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-2145982 Applied For Auburndale, Auburndale, FL FLNot Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П <u>338</u>23 IIS 33823 US Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DENT, JANE F Street Address (P.O. Box Number is Not Acceptable) 4010 MANGO AVE **TAMPA FL 33616** 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. I am familiar with, and accept the obligations of registered agent. 12,2003 **SIGNATURE** Jane F. Dent, Treasurer Feb. 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD TITLE TITLE X Delete ☐ Addition ☐ Change **BOUSEMAN, PAULA** NAME NAME STREET ADDRESS 5133 68TH LANE N STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG FL 33709 CITY-ST-ZiP TITLE ☐ Delete TITLE Change ☐ Addition NAME DENT, JANE F NAME 4010 MANGO AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAMPA FL 33616 CITY-ST-7IP TITLE ☐ Delete TITLE € Change Addition ÞΒ COURTER, ROBERT Courter, Robert: STREET ADDRESS 3721 97TH TERRACE N. STREET ADDRESS 17981 SE 83rd Melody Ave. CITY-ST-ZIP PINELLAS PARK FL 33782 CITY-ST-ZIP The Villages, FL 32162 TITLE x Delete ☐ Change Addition BOGGI, HARRIET NAME NAME 5626 ROCKFIELD LOOP STREET ADDRESS STREET ADDRESS CITY-ST-ZIE Valrico FL 33594 CITY-ST-ZIP TITLE ☐ Delete TITLE ۷D Change XIX Addition NAME NAME Slocum, Don STREET ADDRESS STREET ADDRESS 675 Beardreek Dr. CITY-ST-7IP CITY-ST-7IP <u>Bartow: FL 33830</u> TITLE ☐ Delete TITLE ☐ Change XIX Addition SD NAME NAME Smith, Fred STREET ADDRESS STREET ADDRESS 760 Pleasantview Dr. CITY~ST-ZIP CITY-ST-ZIP <u> Auburndale, FL 33823</u> 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 changed, or on an attachment with an address, with all other like empowered.

ED Jane F. Dent, Treas. 2/12/03 813-839 SIGNATURE: