

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2000 8:00 am
Secretary of State

02-04-2000 90067 022 ****61.25

DOCUMENT # 711696

1. Entity Name

THE CANADIAN CLUB OF CHARLOTTE COUNTY, FLORIDA.

Principal Place of Business

Mailing Address

19505 QUESADA AVE
 BOX 3913
 PT CHARLOTTE FL 33948
 US

19505 QUESADA AVE
 BOX 3913
 PT CHARLOTTE FL 33948-2127
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

26338 Rampart Blvd.

Suite, Apt. #, etc.
UNIT F

Suite, Apt. #, etc.
UNIT F.

City & State
Punta Gorda, FL.

City & State
Punta Gorda FL

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip
33983-6606

Country
Charlotte

Zip
33983-6606

Country
Charlotte

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

WALTERS, HAZEN
 19505 QUESADA AVE
 #3913
 PT CHARLOTTE FL 33948

Name
De Coste Joyce

Street Address (P.O. Box Number is Not Acceptable)
26338 Rampart Blvd.
UNIT F.

City & State
Punta Gorda FL Zip Code
33983-6606

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

Hazen F Walters

Jan 28, 2000

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
P Delete
 NAME
WALTERS, HAZEN
 STREET ADDRESS
19505 QUESADA AVE.
 CITY-ST-ZIP
PORT CHARLOTTE FL

TITLE
P Change Addition
 NAME
Gray, AL
 STREET ADDRESS
7602 Silage Circle
 CITY-ST-ZIP
Port Charlotte, FL. 33981

TITLE
S Delete
 NAME
WALTERS, JUNE
 STREET ADDRESS
19505 QUESADA, BOX 3913
 CITY-ST-ZIP
PT CHARLOTTE FL 33948

TITLE
VP Change Addition
 NAME
De Coste Joyce
 STREET ADDRESS
26338 Rampart Blvd. unit F
 CITY-ST-ZIP
Punta Gorda, FL 33983-6606

TITLE
T Delete
 NAME
EVERETT, GERRY
 STREET ADDRESS
18187 ROBINSON AVE
 CITY-ST-ZIP
PORT CHARLOTTE FL 33948

TITLE
 Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
D Delete
 NAME
BEACOCK, KEN
 STREET ADDRESS
13374 BRONZE AVE
 CITY-ST-ZIP
PT CHARLOTTE FL 33981

TITLE
 Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
VP Delete
 NAME
GRAY, AL
 STREET ADDRESS
7602 SILAGE CIR.
 CITY-ST-ZIP
PORT CHARLOTTE FL

TITLE
 Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
DD Delete
 NAME
ALBRIGHT, AL
 STREET ADDRESS
5997 HOBHILL ST
 CITY-ST-ZIP
NORTH PORT FL

TITLE
 Change Addition
 NAME
 STREET ADDRESS
 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Hazen F Walters**
 Signature and typed or printed name of signing officer or director

Jan 28, 2000 **941-624-2073**
 Date Daytime Phone #

CR2E037 (9/99)