

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

**FILED**  
**Mar 13, 2003 8:00 am**  
**Secretary of State**

02-27-2003 90149 041 \*\*\*61.25

**DOCUMENT # 727638**

1. Entity Name

**ROADRUNNERS SQUARE DANCE CLUB OF THE PALM BEACHE  
S. INC.**



Principal Place of Business

1811 MONTAGUE STREET  
LAKE WORTH FL 33461-6020  
US

Mailing Address

1811 MONTAGUE STREET  
LAKE WORTH FL 33461-6020  
US

2. Principal Place of Business

3040 LAKE OSBORNE DR

3. Mailing Address

3040 LAKE OSBORNE DR

Suite, Apt. #, etc.

#211

Suite, Apt. #, etc.

#211

City & State

LAKE WORTH, FL

City & State

LAKE WORTH FL

Zip  
33461-5928

Country  
USA

Zip  
33461-5928

Country  
USA

4. FEI Number 23-7354113

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HUBBARD, KIPP

1811 MONTAGUE STREET  
LAKE WORTH FL 33461

7. Name and Address of New Registered Agent

Name

HUBBARD, KIPP

Street Address (P.O. Box Number is Not Acceptable)

3040 LAKE OSBORNE DR #211

City LAKE WORTH

FL

Zip Code 33461

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

*Kipp Hubbard*

2-20-03

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  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P  
NAME HUBBARD, KIPP ☐ Delete  
STREET ADDRESS 1811 MONTAGUE STREET  
CITY-ST-ZIP LAKE WORTH FL 33461

TITLE D  
NAME WAKEMAN, GEORGE ☐ Delete  
STREET ADDRESS 724 SOUTH LAKE DRIVE  
CITY-ST-ZIP LANTANA FL 33462

TITLE D ☒ Delete  
NAME GOUGEON, KEN  
STREET ADDRESS 2330 LANTANA RD LOT 4B  
CITY-ST-ZIP LANTANA FL 33462

TITLE SD ☐ Delete  
NAME GORDON ESKRIDGE  
STREET ADDRESS 629 WEST OCEAN AVE  
CITY-ST-ZIP BOYNTON BEACH FL 33426

TITLE T ☒ Delete  
NAME MCLUGHLIN, MIKE  
STREET ADDRESS 515 SW 18TH STREET  
CITY-ST-ZIP BOYNTON BEACH FL 33426

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP DIRECTOR & PRESIDENT ☒ Change ☐ Addition  
NAME HUBBARD, KIPP  
STREET ADDRESS 3040 LAKE OSBORNE DR #211  
CITY-ST-ZIP LAKE WORTH FL 33461-5928

TITLE D ☐ Change ☐ Addition  
NAME WAKEMAN, GEORGE  
STREET ADDRESS 724 SOUTH LAKE DRIVE  
CITY-ST-ZIP LANTANA, FL 33462

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

TITLE SDT SEC. DIRECTOR, TREAS ☒ Change ☐ Addition  
NAME ESKRIDGE, GORDON  
STREET ADDRESS 629 WEST OCEAN AVE  
CITY-ST-ZIP BOYNTON BEACH, FL 33426

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

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:

*Kipp Hubbard*

2-20-03

561-586-3095

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)