2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 730757 1. Entity Name

MARTIN-ST. LUCIE CHAPTER OF S.P.E.B.S.Q.S.A., IN

Principal Place of Business

Mailing Address

1904 N.E. AVENIDA DRACAENA JENSEN BEACH FL 34957

2. Principal Place of Business

1904 N.E. AVENIDA DRACAENA JENSEN BEACH FL 34957

Suite, Apt. #, etc.

3. Mailing Address Suite, Apt. #, etc.

Zip

City & State Zip

City & State

4. FEI Number

5. Certificate of Status Desired

\$8.75 Additional 7. Name and Address of New Registered Agent

65-0437461

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

VAN ALLEN, STEPHEN E. 1701 SE BALMORAL CT PORT SAINT LUCIE FL 34952-4136

6. Name and Address of Current Registered Agent

Country

(NOTE: Registered Agent signature required when reinstating)

Zip Code

Applied For

Not Applicable

FILED

Jul 28, 2002 8:00 am

Secrétary of State

07-28-2002 90174 016 ****61.25

DO NOT WRITE IN THIS SPACE

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.

Country

SIGNATURE

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

After September 13, 2002,

PORT ST LUCIE FL 34952

9. Election Campaign Financing

Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

DATE

min. will be \$236.25. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE D ☐ Delete TITLE NAME SCHOENER, GEORGE YOUNGER, TERRY P.O. BOX 12868 NAME STREET ADDRESS 1904 N.E. AVENIDA DRACAENA STREET ADDRESS CITY-ST-ZIP <u>Jensen Beach Fl 34957</u> FORT PIERCE, FL 34979-2868 CITY-ST-ZIP Delete TITI F PIZZO, SAM CASEY, EDWARD 637 NW BISCAYNE DR. NAME STREET ADDRESS 1225 NW 21ST ST, #3410 STREET ADDRESS STUART FL 34994-9356 CITY-ST-ZIP PORT 57. LUCIE, FL 34983-1524 TITLE: ☐ Delete TITLE NAME VAN ALLEN, STEPHAN NAME STREET ADDRESS 1701 SW BALMORAL CT STREET ADDRESS CITY-ST-ZIP <u>Port st lucie f</u>l 34952-4136 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME RAY, ROBERT NAME STREET ADDRESS 82 AQUA RA DR STREET ADDRESS CITY-ST-7IP <u>JENSEN BEACH FL 34957-2627</u> CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME ECKHARDT, PAUL NAME STREET ADDRESS 2349 SE DELANO RD STREET ADDRESS CITY-ST-ZIP PORT ST LUCIE FL 34952-5557 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME PELLERIN, CLAUDE NAME STREET ADDRESS 2308 SE HOLLAND ST STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

WESTEPHEN VAN ALLEN 07/23/12 335-722