

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 731293

1. Entity Name

CHARLOTTE AMATEUR RADIO SOCIETY, INC.

**FILED**  
**Feb 15, 2000 8:00 am**  
**Secretary of State**

02-15-2000 90044 046 \*\*\*\*61.25

Principal Place of Business P O BOX 415 PUNTA GORDA FL 33951	Mailing Address P O BOX 415 PUNTA GORDA FL 33951
--	--

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State	4. FEI Number <b>65-0355578</b>	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ALLAIRE, RICHARD V.**  
**2309 TALBROOK TER.**  
**PT CHARLOTTE FL 33983**

7. Name and Address of New Registered Agent

Name

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

City **FL** 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 Richard V. Allaire, Sec'y. DATE Feb. 1, 2000

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JOHNSON, GUICE W. 150 CRESCENT DR. PUNTA GORDA FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZWEIG, REINHOLD 4080 HARBOR BLVD PORT CHARLOTTE FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCDANIEL, WYATT 351 CAPRI ISLES COURT PUNTA GORDA FL <input type="checkbox"/> Delete <i>No change</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LIGGETT, JOHN D 250 SPRING LAKE BLVD PORT CHARLOTTE FL <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZABORONAK, AL 353 CASALE ST PORT CHARLOTTE FL <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WEATHERLY, ROGER 1447 SEA FAN DR PUNTA GORDA FL <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition P JOHNSON, GUICE W. 150 CRESCENT DR. PUNTA GORDA FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition VP ZWEIG, REINHOLD 4080 HARBOR BLVD PORT CHARLOTTE FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Sec. RICHARD V. ALLAIRE 2309 Talbrook Terr. Punta Gorda, FL 33983
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Treas SMITH, Robert R. 2133 Edgewater Dr. Port charlotte, FL.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition DIR WEATHERLY, ROGER 1447 SEA FAN DR PUNTA GORDA FL

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: SIGNATURE Feb 15, 2000: Richard V. Allaire, Sec'y  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Richard V. Allaire Daytime Phone 904-230-3000

CR2E037 (9/99)