

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 14, 2001 8:00 am**  
**Secretary of State**

03-14-2001 90505 046 \*\*\*\*61.25

**DOCUMENT # 731529**

1. Entity Name  
**AUDAVIN SOCIAL CLUB, INCORPORATED**

Principal Place of Business C/O CAROLE CORN 2413 E SAN LUIS AVE AVON PARK FL 33825 US	Mailing Address C/O CAROLE CORN 2413 E SAN LUIS AVE AVON PARK FL 33825 US
---	---

**730805**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2441 E San Jose Ave Suite, Apt. #, etc.	3. Mailing Address 2441 E. San Jose Ave Suite, Apt. #, etc.
--	---

City & State Avon Park, FL.	City & State Avon Park, FL.	4. FEI Number NOT APPLICABLE	Applied For Not Applicable
Zip 33825	Country U.S.	Zip 33825	Country U.S.

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

6. Name and Address of Current Registered Agent  
**EDWARDS, CHARLES E**  
**2400 E SAN LUIS AVE**  
**AVON PARK FL 33825**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
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	PD BALBAUGH, NEIL 2413 E. SAN LUIS AVENUE AVON PARK FL 33825 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HERSHBERGER, ELVA 2402 E. SAN JOSE AVENUE AVON PARK FL 33825 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, BETTY 2411 E. LAKE BONNETT ROAD AVON PARK FL 33825 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BROWN, JANE 2441 E. SAN JOSE AVENUE AVON PARK FL 33825 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Ackerman, Linda 2418 E. San Jose Ave. Avon Park FL. 33825 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: JANE BROWN, RE JANE BROWN Treas. Date: 3/12/01  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(614) 451-8201  
 and  
 (863) 452-2479  
Daytime Phone #

CR2E037 (10/00)