

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

FILED
Mar 26, 2003 8:00 am
Secretary of State

3/1

03-12-2003 90129 020 ****61.25

DOCUMENT # 732454

1. Entity Name

THE TROPICAL SHORES CIVIC CLUB, INC.



Principal Place of Business

**1601 LIVINGSTONE ST
SARASOTA FL 34231**

Mailing Address

**1601 LIVINGSTONE ST
SARASOTA FL 34231**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1030574**

Applied For

Not Applicable

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

**PAUL, AMY
1663 COLLEEN ST.
SARASOTA FL 34231**

Name **Lorenz, Theresa**

Street Address (P.O. Box Number is Not Acceptable)
1613 Wharf Rd

Sarasota

City

FL

Zip Code

34231

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

Theresa Lorenz

(NOTE: Registered Agent signature required when reinstating)

DATE

Theresa Lorenz 3/10/03

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	CACCIA, CHRIS	STREET ADDRESS	1659 COLLEEN	CITY-ST-ZIP	SARASOTA FL 34231	☒ Delete
TITLE	T	NAME	LAURITSEN, TERRY	STREET ADDRESS	8639 DUNMORE DRIVE	CITY-ST-ZIP	SARASOTA FL 34231	☒ Delete
TITLE	S	NAME	PAUL, AMY	STREET ADDRESS	1163 COLLEEN	CITY-ST-ZIP	SARASOTA FL 34231	☒ Delete
TITLE	VD	NAME	LORENZ, THERESA	STREET ADDRESS	1613 WHARF ROAD	CITY-ST-ZIP	SARASOTA FL 34231	☐ Delete
TITLE	D	NAME	ROMANCE, MARK	STREET ADDRESS	1627 WHARF RD	CITY-ST-ZIP	SARASOTA FL 34231	☐ Delete
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	V/D	NAME	JAY LORENZ	STREET ADDRESS	1613 WHARF ROAD	CITY-ST-ZIP	SARASOTA FL 34231	☐ Change ☒ Addition
TITLE	T/D	NAME	GEORGE GUESS	STREET ADDRESS	1615 DUNMORE WAY	CITY-ST-ZIP	SARASOTA FL 34231	☐ Change ☒ Addition
TITLE	S	NAME	ELEANOR DAMOS	STREET ADDRESS	1673 BOYCE ST	CITY-ST-ZIP	SARASOTA FL 34231	☐ Change ☒ Addition
TITLE	P/D	NAME		STREET ADDRESS		CITY-ST-ZIP		☒ Change ☐ Addition
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

Theresa Lorenz **Theresa Lorenz 3/10/03 941-366-0333**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)