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

Mailing Address

SUITE 5

21202 OLEAN BLVD.

3. Mailing Address

City & State

Zip

PT CHARLOTTE FL 33952

Suite, Apt. #, etc.

DOCUMENT # 735333

Principal Place of Business

PT CHARLOTTE FL 33952

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE

2. Principal Place of Business

21202 OLEAN BLVD.

SUITE 5

THE EASY DOES IT CLUB OF PORT CHARLOTTE, INC.

6. Name and Address of Current Registered Agent



FILED Mar 06, 2003 8:00 am § Secretary of State

03-06-2003 90109 041 ****70.00

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·	CHECK HERE I	F MAKIN	NG CHA	ANGES		
*	4. FEI Number 65-0043245	-		Applied For		
				Not Applicable		
try	5. Certificate of Status Desired	×	\$8.75 Additional Fee Required			
	7. Name and Address of New Re	gisterec	d Agent			
Name			-			
Street Address	(P.O. Box Number is Not Acceptable)			<u>.</u>		
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LUPTON, JOSEPH 21202 OLEAN BLVD. SUITE 5 PT CHARLOTTE FL 33952

the obligations of registered agent.

Country

,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

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

Zip Code

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10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10						J 10	
*TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BISCHOF, W F 21202 OLEAN BLVD. PT CHARLOTTE FL 33952	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Lee Weisha 21180 Gertn	r drAve.	- Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GRUDT, D 21202 OLEAN BLVD. PT CHARLOTTE FL-33952	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Edwin L. L 22294 Mid Port Churlo	uct lway blud.	4 Change	Addition .
NAME STREET ADDRESS CITY-ST-ZIP	D SCHMIDT, MARGUERITE 21202 OLEAN BLVD. PT CHARLOTTE FL 33952	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MIKE CUlle 4646 Fullo Portchurlo	y et	4 Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Johnston, Duane 21202 Olean Blvd. Pt Charlotte Fl 33952	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Janelle Po 6498 Scot Punta Gon	sdale St.	Penange	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Jaques, Edw. 21202 Olean BLVD Pt. Charlotte FL 33952	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , , ,		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LUPTON, JOSEPH 21202 OLEAN BLVD PORT CHARLOTTE FL 33952	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition

12. I hereby certify that the information supplied with this filling 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:

Edwin L. Luce 3/3