

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 04, 2002 8:00 am
Secretary of State

03-04-2002 90017 015 ****61.25

DOCUMENT # 754287

1. Entity Name

PENSACOLA CHAPTER, INC., THE RETIRED OFFICERS AS SOCIATION.

Principal Place of Business

Mailing Address

P.O. BOX 4979
PENSACOLA FL 32507

P.O. BOX 4979
PENSACOLA FL 32507

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-9033907

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**DUCOTE, RICHARD
DYNASTY DR.
PENSACOLA FL 32514**

Name
Lawrence Rodgers

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

1501 E. Lakeview Ave.

Pensacola FL, 32503

City

FL

Zip Code
32503

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 Lawrence Rodgers (S)

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME **D HEITER, TONY** ☒ Delete
STREET ADDRESS **PO BOX 3471**
CITY-ST-ZIP **GULF SHORES AL 36947**

TITLE NAME **P** ☒ Change ☐ Addition
STREET ADDRESS **Harry Herman**
CITY-ST-ZIP **1024 Bonita Dr., Pensacola FL 32507**

TITLE NAME **P** ☒ Delete
STREET ADDRESS **ZICKERT, MARTIN**
CITY-ST-ZIP **3142 OXFORD CIR GULF SHORES AL 32561**

TITLE NAME **1ST VP** ☒ Change ☐ Addition
STREET ADDRESS **Joan Engle**
CITY-ST-ZIP **8775 Thunderbird Pensacola FL 32503**

TITLE NAME **V** ☒ Delete
STREET ADDRESS **MILHEIM, VANN**
CITY-ST-ZIP **3001 MARCUS POINTE BLVD PENSACOLA FL 32505**

TITLE NAME **2ND VP** ☒ Change ☐ Addition
STREET ADDRESS **Ezra Merritt**
CITY-ST-ZIP **3485 Marcus Pt. Blvd Pensacola FL 32505**

TITLE NAME **T** ☐ Delete
STREET ADDRESS **O'CONNOR, DANIEL J**
CITY-ST-ZIP **1913 FILLY RD. CANTONMENT FL 32533**

TITLE NAME **(S)** ☒ Change ☐ Addition
STREET ADDRESS **Lawrence Rodgers**
CITY-ST-ZIP **1501 E Lakeview Ave Pensacola FL 32503**

TITLE NAME **SD** ☒ Delete
STREET ADDRESS **DUCOTE, RICHARD**
CITY-ST-ZIP **5401 DYNASTY DR PENSACOLA FL 32504**

TITLE NAME **(T)** ☐ Change ☐ Addition
STREET ADDRESS **Daniel Oconnor**
CITY-ST-ZIP **1913 Filly Rd. Cantonment FL 32533**

TITLE NAME **D** ☒ Delete
STREET ADDRESS **ENGLANDER, OWEN**
CITY-ST-ZIP **4631 BAYBREAK DR. PENSACOLA FL 32514**

TITLE NAME **(D)** ☒ Change ☐ Addition
STREET ADDRESS **Curtis Brotherton**
CITY-ST-ZIP **5962 Grande Lagoon Blvd Pensacola FL 32507**

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:

Lawrence Rodgers **Lawrence Rodgers Sec. 2-20-02 438 7812**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)