

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 29, 2002 8:00 am
Secretary of State

03-29-2002 91501 001 ****61.25
03-29-2002 91501 002 *****8.75

DOCUMENT # 758187

1. Entity Name

WEST STATE ARCHAEOLOGICAL SOCIETY, INC.

Principal Place of Business

% CHARLIE BODISHBAUGH
6420 MURRAY HILLS DRIVE
TAMPA FL 33615
US

Mailing Address

% CHARLIE BODISHBAUGH
6420 MURRAY HILLS DRIVE
TAMPA FL 33615
US

2. Principal Place of Business

13542 N. Florida Ave.

3. Mailing Address

P.O. Box 17365

Suite, Apt. #, etc.

#212

Suite, Apt. #, etc.

City & State

Tampa Fl.

City & State

Tampa Fl.

Zip

33612

Country

Hillsborough

Zip

33682-7374

Country

Hillsborough

6. Name and Address of Current Registered Agent

LARIS, GILBERT JR
4206 EAST 97TH AVE
TAMPA FL 33614

4. FEI Number

59-2435378

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name Michael D McBeth III

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

10418 Newport Cr

City

Tampa

FL

Zip Code

33612

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

Michael D McBeth III President

3/13/02

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

TITLE	PD	☒ Delete
NAME	LARIS, GILBERT A	
STREET ADDRESS	9206 E 97 AVE	
CITY-ST-ZIP	TAMPA FL 33617-4429	
TITLE	T	☒ Delete
NAME	WOODWORTH, ESTHER	
STREET ADDRESS	30016 LYNNE DR.	
CITY-ST-ZIP	WESLEY CHAPEL FL 33543	
TITLE	S	☒ Delete
NAME	SCHAMER, AMANDA	
STREET ADDRESS	103 W. NORTH STREET	
CITY-ST-ZIP	TAMPA FL 33604	
TITLE	VPD	☒ Delete
NAME	CUNNINGHAM, DAVID	
STREET ADDRESS	16004 MIDLAWN PL	
CITY-ST-ZIP	TAMPA FL 33624	
TITLE	D	☒ Delete
NAME	CROSBY, RON	
STREET ADDRESS	8422 N PACKWOOD AVE	
CITY-ST-ZIP	TAMPA FL 33604	
TITLE	D	☒ Delete
NAME	SINGLETON, JIM	
STREET ADDRESS	4407 W ANITA BLVD	
CITY-ST-ZIP	TAMPA FL 33611	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Change ☒ Addition
NAME	Michael D McBeth	
STREET ADDRESS	10418 Newport Cr	
CITY-ST-ZIP	Tampa FL 33612	
TITLE	S	☐ Change ☒ Addition
NAME	Brent D. Granger	
STREET ADDRESS	15031 Arbors Reserve Circle Apt 102	
CITY-ST-ZIP	Tampa, FL 33618	
TITLE	T/D	☐ Change ☒ Addition
NAME	Esther Woodworth	
STREET ADDRESS	30016 LYNNE Dr.	
CITY-ST-ZIP	Wesley Chapel FL 33543	
TITLE	V	☐ Change ☒ Addition
NAME	JOE GAGLIANO	
STREET ADDRESS	7919 NORTHBRIDGE BLVD	
CITY-ST-ZIP	TAMPA, FL 33615	
TITLE	D	☐ Change ☒ Addition
NAME	woody woodworth	
STREET ADDRESS	30016 LYNNE Dr.	
CITY-ST-ZIP	Wesley Chapel FL 33543	
TITLE	M	☐ Change ☒ Addition
NAME	Philip Myers	
STREET ADDRESS	5601 N. Florida Ave	
CITY-ST-ZIP	Tampa FL 33604	

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:

Michael D McBeth III

3/12/02

(813) 961-7294

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)