

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 09, 2001 8:00 am**  
**Secretary of State**

07-18-2001 90258 043 \*\*\*\*61.25

001142

DOCUMENT # **N00000002123**

1. Entity Name

**COCKROACH BAY USER'S GROUP, INC.**

Principal Place of Business

P O BOX 812  
 RUSKIN FL 33570

Mailing Address

P O BOX 812  
 RUSKIN FL 33570

2. Principal Place of Business

~~RUSKIN FL~~  
 Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-3692259**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**FELDSCHAU, CHARLES T**  
**720 MASTERPIECE DR**  
**SUN CITY CENTER FL 33573**

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

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**  
**After September 12, 2001, min. will be \$236.25**

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 **DIRECTOR**  Delete  
 NAME **WILLIAM DURLANE**  
 STREET ADDRESS **1920 LIGHTFOOT ROAD**  
 CITY-ST-ZIP **WIMAUMA, FL 33598**

TITLE **DIRECTOR**  Delete  
 NAME **JAMES ANDERSON**  
 STREET ADDRESS **PO. BOX 1414**  
 CITY-ST-ZIP **RUSKIN, FL 33570**

TITLE **DIRECTOR**  Delete  
 NAME **GUS M. UENCH, JR.**  
 STREET ADDRESS **3031 MANATEE AVE, S.W.**  
 CITY-ST-ZIP **RUSKIN FL 33570**

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PRES.**  Change  Addition  
 NAME **Edward P. Benus**  
 STREET ADDRESS **2324 cypress walk way**  
 CITY-ST-ZIP **Ruskin, FL 33570**

TITLE **VP**  Change  Addition  
 NAME **George E. Hammond**  
 STREET ADDRESS **903 Bunker View**  
 CITY-ST-ZIP **Apollo Beach, FL 33572**

TITLE **Sec**  Change  Addition  
 NAME **Charles T. Feldschau**  
 STREET ADDRESS **720 Masterpiece Dr.**  
 CITY-ST-ZIP **Sun City, FL 33573**

TITLE **Treas.**  Change  Addition  
 NAME **Dan LaValley**  
 STREET ADDRESS **610 Manatee Dr. SW**  
 CITY-ST-ZIP **Ruskin, FL 33570**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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: *Dan LaValley*

*Dan LaValley* **Dan LaValley**

5/31/01

813-645-9101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Directors added*  
*Charles T. Feldschau Sec 8/1/01 813/634-5592.*

CR2E037 (5/01)