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

## DOCUMENT # **N03955**

1. Entity Name

## BRANDON SHRINE CLUB HOLDING CORPORATION



Principal Place of Business Mailing Address P.O. BOX 282 P.O. BOX 282 BRANDON FL 33509-0282 BRANDON FL 33509-0282 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Country

FILED Jan 27, 2003 8:00 am **Secretary of State** 

01-27-2003 90328 007 \*\*\*\*61.25

000TY~~ 

☐ CHECK HERE IF MAKING CHANGES
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Applied For 4. FE! Number 59-2454370 Not Applicable \$8.75 Additional Certificate of Status Desired. 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent \_Name ----

HAMPTON, DOUGLAS W 205 N PARSONS AVE **BRANDON FL 33510** 

Street Address	(P.O. B	ax Numb	er is No	. Accent	able

City

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. I am familiar with, and accept the obligations of registered agent.

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

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. SD Jewell Dennis TITLE ☐ Delete TITLE ■ Addition ST.JOHN, ROBERT C NAME 9822 11 GAUAGHER RD STREET ADDRESS 3704 KANTREL PLACE STREET ADDRESS DOIGE FL 33527 CITY-ST-7/P VALRICO FL 33594 CITY-ST-ZIP Delete TITLE YP ☐ Change **Addition** TITLE Dumono MARCUS CRABTREE, CLINTON 125 HILLDRY CREEK DR. 110 MOBILE PLACE STREET ADDRESS STREET ADDRESS Beandon Fl 33511 CITY-ST-ZIP BRANDON FL CITY-ST-ZIP Delete TITLE TITLE ☐ Addition ☐ Change HAWLEY, DON C NAME NAME 723 SUNBRIGHT DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SEFFNER FL 33584 CITY-ST-ZIP Delete ☐ Addition TITLE TITLE JEWELL, DENNIS NAME NAME 4822 N. GALLAGHER RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DOVER FL 33527 CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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:

813.684.6603