

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

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91336 014 ****61.25

DOCUMENT # N04910

1. Entity Name

GRASSROOTS COMMUNITY MEMBERS ASSOCIATION, INC.



Principal Place of Business

**2458 GRASSROOTS WAY
TALLAHASSEE FL 32311**

Mailing Address

**2458 GRASSROOTS WAY
TALLAHASSEE FL 32311**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2574117**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

11024937



6. Name and Address of Current Registered Agent

**SEERY, GEORGE PATRICK
2458 GRASSROOTS WAY
TALLAHASSEE FL 32311**

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. 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**

10. OFFICERS AND DIRECTORS

TITLE	DP	<input checked="" type="checkbox"/> Delete
NAME	FINER, BOBBI JO	
STREET ADDRESS	5076 SWEET BASIL LANE	
CITY-ST-ZIP	TALLAHASSEE FL 32311	
TITLE	DT	<input checked="" type="checkbox"/> Delete
NAME	GAUDIO, ANTHONY	
STREET ADDRESS	2335 GRASSROOTS WAY	
CITY-ST-ZIP	TALLAHASSEE FL 32311	
TITLE	DVP	<input checked="" type="checkbox"/> Delete
NAME	SERVICE, STEVE	
STREET ADDRESS	5052 SWEET BASIL LANE	
CITY-ST-ZIP	TALLAHASSEE FL 32311	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	HOCHSTETLER, KENN	
STREET ADDRESS	2408 GRASSROOTS WAY	
CITY-ST-ZIP	TALLAHASSEE FL 32311	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GOTTSCHALK, NECHEMA	
STREET ADDRESS	2367 MOONDANCE TR	
CITY-ST-ZIP	TALLAHASSEE FL 32311	
TITLE	D	<input type="checkbox"/> Delete
NAME	GREEN, BEN	
STREET ADDRESS	2359 GRASSROOTS WAY	
CITY-ST-ZIP	TALLAHASSEE FL 32311	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DB	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JACOBSEN, CHUCK	
STREET ADDRESS	2301 GRASSROOTS WAY	
CITY-ST-ZIP	TALLAHASSEE, FL. 32311	
TITLE	DVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WOOD, ROSANNE	
STREET ADDRESS	2264 GRASSROOTS WAY	
CITY-ST-ZIP	TALLAHASSEE, FL. 32311	
TITLE	DS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SHARGEL, MANNY	
STREET ADDRESS	2002 SHERIDAN RD.	
CITY-ST-ZIP	TALLAHASSEE, FL. 32303	
TITLE	DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SEERY, PATRICK	
STREET ADDRESS	2432 GRASSROOTS WAY.	
CITY-ST-ZIP	TLH	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D/P	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> 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:

SIGNATURE REQUIRED SEERY

4/25/03

850-656-3629

CR2E037 (10/02)