## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000003546

Entity Name: EAST PASCO USBC ASSOCIATION INC.

Jul 12, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

6025 EVANSBROOK DR ZEPHYRHILLS, FL 33541

**Current Mailing Address: New Mailing Address:** 

6025 EVANSBROOK DR ZEPHYRHILLS, FL 33541

FEI Number: 20-3540814 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MENETRE, TRACY L 6025 EVANSBROOK DR ZEPHYRHILLS, FL 33541 US

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:

Date

Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

**PRES** () Delete

FREED, ARTHUR L Name: 37055 JANET CIRCLE Address: City-St-Zip: DADE CITY, FL 33525

Title: ( ) Delete

**OFFICERS AND DIRECTORS:** 

Name: TOTH, CARL

Address: 34018 WOODLAND CIRCLE City-St-Zip: DADE CITY, FL 33523

Title: MGR () Delete MENETRE, TRACY L

Name: Address: 6025 EVANSBROOK DR City-St-Zip: ZEPHYRHILLS, FL 33541

DOWNEY, RICHARD L Name: Address: 13417 BRADLEY DR City-St-Zip: DADE CITY, FL 33525

Title: (X) Change ( ) Addition

Name: TOTH, CARL

Address: 34038 WOODLAND CIRCLE City-St-Zip: DADE CITY, FL 33523

Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TRACY L MENETRE MGR 07/12/2008