

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90290 001 *****61.25
 03-05-2002 90290 002 *****8.75

DOCUMENT # N21772

1. Entity Name

TAMPA & YBOR CITY STREET RAILWAY SOCIETY, INC.

Principal Place of Business

% RICHARD C. SWIRBUL
 P.O. BOX 972
 TAMPA FL 33601
 US

Mailing Address

% RICHARD C. SWIRBUL
 P.O. BOX 972
 TAMPA FL 33601
 US

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

59-2884459

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SWIRBUL, RICHARD C
 134 SOUTH TAMPA STREET
 TAMPA FL 33602

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
 NAME **SMITH, JAN**
 STREET ADDRESS **3627 BERGER RD**
 CITY-ST-ZIP **LUTZ FL 33549**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **MCGEE, STEVE**
 STREET ADDRESS **5205 ADAMO DRIVE**
 CITY-ST-ZIP **TAMPA FL 33619**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **SD** ☐ Delete
 NAME **DUNHAM, ELIZABETH**
 STREET ADDRESS **225 S FRANKLIN ST**
 CITY-ST-ZIP **TAMPA FL 33602**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **TD** ☐ Delete
 NAME **SWIRBUL, RICHARD C**
 STREET ADDRESS **134 S. TAMPA ST.**
 CITY-ST-ZIP **TAMPA FL 33602**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VP** ☐ Delete
 NAME **JENNEWAIN, JOAN**
 STREET ADDRESS **1320 EAST 8TH AVENUE, #7**
 CITY-ST-ZIP **TAMPA FL**

TITLE ☒ Change ☐ Addition
 NAME **JOAN JENNEWAIN**
 STREET ADDRESS **4710 Clear**
 CITY-ST-ZIP **TAMPA, FL 33629**

TITLE **P** ☐ Delete
 NAME **ENGLISH, MICHAEL**
 STREET ADDRESS **P.O. BOX 3012**
 CITY-ST-ZIP **TAMPA FL 33601-3012**

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:

Richard C Swirbul **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/15/02

CR2E037 (9/01)