2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2002 8:00 am
Secretary of State
04-17-2002 90146 019 ****61.25

DOCUMENT # N24391

1. Entity Name

SCOTTISH TERRIER CLUB OF TAMPA BAY, INC.

Principal Place of Business	Mailing Address
7349 ULMERTON ROAD LOT #126 LARGO FL ~~34641~~ 33771	7349 ULMERTON ROAD LOT #126 LARGO FL ~~34641~~ 33771

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip 33771 / Country	Zip 33771 / Country

4. FEI Number NOT APPLICABLE ☐ 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
LAVERS, BETTY J. 7349 ULMERTON ROAD LOT #126 LARGO FL 33771	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P DONNA TURNER 2201 WHITLOCK PL DOVER FL 33527	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT SUSAN NUTE 405 OAK REGENCY LANE BRANDON, FL 33511	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP NUTE, SUSAN 405 OAK REGENCY LANE BRANDON FL 33511	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DONNA NEALE 5527 COUNTRY LAKES TRAIL SARASOTA, FL	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RCD NEALE, DONNA 5527 COUNTRY LAKES TRAIL SARASOTA FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RCD LAURIE SLATER 15908 MCGLAMERY RD. ODESSA, FL 33556	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CSD DRISCOLL, ELIZABETH 529 RICHARDS AVE CLEARWATER FL 33755	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LEONARD, GERRY 509 NANTUCKET DR. TEMPLE TERRACE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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] BETTY J. LAVERS 4/8/02 727-301-1025
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #