## **2000 UNIFORM BUSINESS REPORT (UBR)**

## FILED **DOCUMENT # N26794** Jun 02, 2000 8:00 am **Secretary of State** OLD SEMINOLE HEIGHTS NEIGHBORHOOD ASSOCIATION, I 06-02-2000 90019 002 \*\*\*\*61.25 Principal Place of Business Mailing Address OLD SEMINOLE HEIGHTS NEIGHBORHOOD ASSOC OLD SEMINOLE HEIGHTS NEIGHBORHOOD ASSOC PO BOX 360022 PO BOX 360022 **TAMPA FL 33673** TAMPA FL 33673-0022 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State NOT APPLICABLE Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Bill-Hunter---Street Address (P.O. Box Number is Not Acceptable) A. EVAN ST.IVES 1227 E POWHATAN AVE TAMPA FL 33604 Zip Code 33604 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: **\$5.00** May Be Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Delete TITLE Bob Shackel ford NAME NAME A. EVAN ST.IVES 1315 E. Diana St. Tampa FL 33604. Bob Runnels Schange Addition STREET ADDRESS STREET ADDRESS 1227 E POWHATAN AVE CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33604 Delete TITLE TITLE NAME NAME THOAMS, DON 120 W. Powhatton St. Tampa FL 38604 STREET ADDRESS STREET ADDRESS 710 EAST BROAD STREET CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33604** ☐ Change ☐ Addition TITLE: Delete TITLE NAME NAME HUNTER, BILL STREET ADDRESS STREET ADDRESS 202 EAST NORTH ST CITY-ST-7IP CITY-ST-ZIP **TAMPA FL 33604** ☐ Change Addition ☐ Delete TITLE NAME NAME REED, RAYMOND STREET ADDRESS STREET ADDRESS 1421 HILTON PL CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33604 **Change** TITLE Delete TITLE TR NAME DIBONA, DOREEN NAME Duva 11 STREET ADDRESS STREET ADDRESS 203 W POWHATAN AVE. 5408 N Branch Ave Tampe FL 33604 CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33604** TITLE TR ☐ Delete TITLE NAME GLUCKMAN, STEVE NAME STREET ADDRESS STREET ADDRESS 5114 N SUWANEE CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33603** 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