

2002 UNIFORM BUSINESS REPORT (UBR)

5/27

FILED
Jul 11, 2002 8:00 am
Secretary of State

05-27-2002 90362 023 ****61.25

DOCUMENT # N26794

1. Entity Name

OLD SEMINOLE HEIGHTS NEIGHBORHOOD ASSOCIATION, INC.

Principal Place of Business

OLD SEMINOLE HEIGHTS NEIGHBORHOOD ASSOC
 PO BOX 360022
 TAMPA FL 33673
 US

Mailing Address

OLD SEMINOLE HEIGHTS NEIGHBORHOOD ASSOC
 PO BOX 360022
 TAMPA FL 33673
 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

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

HUNTER, BILL
202 E. NORTH ST
TAMPA FL 33604

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	S	SHACKELFORD, BOB	☒ Delete
NAME		1315 E. DIENA ST	
STREET ADDRESS		TAMPA FL 33604	
CITY-ST-ZIP			
TITLE	V	ST. WES, A. EVAN	☐ Delete
NAME		E. POWHATTAN ST	
STREET ADDRESS		TAMPA FL 33604	
CITY-ST-ZIP			
TITLE	TR	HUNTER, BILL	☐ Delete
NAME		202 EAST NORTH ST	
STREET ADDRESS		TAMPA FL 33604	
CITY-ST-ZIP			
TITLE	T	REED, RAYMOND	☐ Delete
NAME		1421 HILTON PL	
STREET ADDRESS		TAMPA FL 33604	
CITY-ST-ZIP			
TITLE	P	DUVALL, BILL	☐ Delete
NAME		5408 N BRANCH AVE	
STREET ADDRESS		TAMPA FL 33604	
CITY-ST-ZIP			
TITLE	TR	GLUCKMAN, STEVE	☐ Delete
NAME		5114 N SUWANEE	
STREET ADDRESS		TAMPA FL 33603	
CITY-ST-ZIP			

TITLE	S	Slaughter, Stacy	☐ Change ☒ Addition
NAME		311 E. Minnehaha St.	
STREET ADDRESS		Tampa, FL 33604	
CITY-ST-ZIP			
TITLE		Trustee	☐ Change ☐ Addition
NAME		Peggy Blair	
STREET ADDRESS		5504 N Seminole Ave Tampa 33604	
CITY-ST-ZIP			
TITLE		Trustee	☐ Change ☐ Addition
NAME		Doreen DiBons	
STREET ADDRESS		203 W Powhattan Ave Tampa 33604	
CITY-ST-ZIP			
TITLE		Trustee	☐ Change ☐ Addition
NAME		Bea Plantamura	
STREET ADDRESS		1211 E Idlewild Tampa 33604	
CITY-ST-ZIP			
TITLE			☐ Change ☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
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:

SIGNATURE REQUIRED RAYMOND REED

1/15/02

813 636 3611

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)