

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90262 007 ****61.25

DOCUMENT # N34522

1. Entity Name

SOUTH CLEARWATER CITIZENS FOR PROGRESSIVE ACTION

Principal Place of Business

1426 SOUTH GREENWOOD
 CLEARWATER FL 33756
 US

Mailing Address

1120 KINGSLEY
 CLEARWATER FL 33756-3562
 US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2994917

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

TIEMAN, L D
1120 KINGLEY ST
CLEARWATER FL 33756

7. Name and Address of New Registered Agent

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 *L. Duke Tieman*
 Signature, typed or printed name of registered agent and title if applicable.

L. DUKE TIEMAN
 (NOTE: Registered Agent signature required when reinstating)

12 JANUARY 2000
 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

TITLE **PD** Delete
 NAME **TIEMAN, L. "DUKE"**
 STREET ADDRESS **1120 KINGSLEY ST**
 CITY-ST-ZIP **CLEARWATER FL 33756**

TITLE **VD** Delete
 NAME **JENKINS, JOHN**
 STREET ADDRESS **1146 ALMA**
 CITY-ST-ZIP **CLEARWATER FL 33756**

TITLE **SD** Delete
 NAME **TIEMAN, GENI**
 STREET ADDRESS **1120 KINGSLEY ST**
 CITY-ST-ZIP **CLEARWATER FL 33756**

TITLE **TD** Delete
 NAME **WOODS, LUCILLE**
 STREET ADDRESS **1528 TILLEY AVENUE**
 CITY-ST-ZIP **CLEARWATER FL 33756**

TITLE **D** Delete
 NAME **DUDLEY, LUCILLE**
 STREET ADDRESS **1584 TILLEY AVENUE**
 CITY-ST-ZIP **CLEARWATER FL 33756**

TITLE **D** Delete
 NAME **CARPENTER EMMET W.**
 STREET ADDRESS **1565 SCRANTON AVENUE**
 CITY-ST-ZIP **CLEARWATER FL 33756**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
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 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 *L. Duke Tieman* **DUKE TIEMAN**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12 JANUARY 2000
 Date

727-946-3853
 Daytime Phone #

CR2E037 (9/99)