

2000 UNIFORM BUSINESS REPORT (UBR)

AMENDED

5/16/00-90144-016-\$61.25-\$61.25

DOCUMENT # N39750

1. Entity Name
NATURE COAST LODGE #2502, INC.

(Revised Copy)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 NOV -6 PM 12:04

Principal Place of Business
EUGENE GESSELLI
~~C/O ROSEMARY SALUTE~~
P O BOX 5232
SPRING HILL FL 34611-5232
US

Mailing Address
EUGENE GESSELLI
~~C/O ROSEMARY SALUTE~~
P O BOX 5232
SPRING HILL FL 34611-5232
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.
City & State

3. Mailing Address
Suite, Apt. #, etc.
City & State

4. FEI Number **59-3028513**
Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
GESSELLI, ANNETTE
8164 TEDBURN PARK
SPRING HILL FL 34806

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 _____ DATE _____
Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating)

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 DT	<input checked="" type="checkbox"/> Delete JOHN ANNITTO 4525 RACHEL BLVD SPRING HILL FL 34607
TITLE DS	<input type="checkbox"/> Delete GESSELLI, ANNETTE 8164 TEDBURN PARK SPRING HILL FL 34806
TITLE VP	<input checked="" type="checkbox"/> Delete EUGENE GESSELLI 8164 TEDBURN PK SPRINGHILL FL 34808
TITLE DP	<input checked="" type="checkbox"/> Delete ROSEMARY SALUTE 8405 ALBERTA ST BROOKSVILLE FL 34609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition CARDIANN LICATA 8175 WINDING OAK LANE SPRING HILL, FL. 34606
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 700003474937 -11/27/00--01004--005-- *****61.25 *****61.25
TITLE DP -	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition EUGENE GESSELLI 8164 TEDBURN PARK SPRING HILL, FL. 34606
TITLE DS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition RITA MIONE 200 HAGUE COURT SPRING HILL, FL 34606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *ANNETTE GESSELLI*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/2000
Date
Device Phone #

CR2E037 (9/99)