2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N47059

FILED Apr 24, 2003 8:00 am Secretary of State

Process Place of Business Malling Address No. 1 Report R. 1980 Sullo. Apt. 4 old: 2 Principal Place of Business Sullo. Apt. 4 old: 2 Sullo. Apt. 4 old: 3 Malling Address Sullo. Apt. 4 old: 4 FEI Number of Sullo. Apt. 4 old: City & State City & Stat		CLUB OF FORT PIERCE INC.					048 ******61		
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GIT-51-2IF FORT PIERCE FL 34950 TOKI PIERCE, PI 2478	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	WAGNER, CINDY 1183 COMMERCE CRT APT #205 FORT PIERCE FL 34949 VPD WARREN, GRACE 1223 S BAYSHORE DR APT 304 FORT PIERCE FL 34949 VPD PARKIN, DIXIE 1705 BAYSHORE DR FORT PIERCE FL 34949 SD DAVIS, VELMA 4164A GATOR TRACE VILLAS CIR FORT PIERCE FL 34982 SD YOUNG, ROSE 509 HOLLY AVE FORT PIERCE FL 34982 TD SCHURMANN, MARY ANN	Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HERI 2021 FORT VPD WILL 1435 FORT SD VAN 1009 FORT	DOITIONS/CHANGES TO OFFICERS AND MEN; H. TRIS STHIRL STREET PIERCE, FI 34950 S. JEANNE TE CAPTAINS WANKAPT. B PIERCE, FI 34950 der Lingt, Mary S. Heaver Canal Rd. PIERCE, FI 34943 CER, SHIRLEY GRAND VIOLD DIJ	Change Change Change	Addition Addition Addition Addition	
	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	WAGNER, CINDY 1183 COMMERCE CRT APT #205 FORT PIERCE FL 34949 VPD WARREN, GRACE 1223 S BAYSHORE DR APT 304 FORT PIERCE FL 34949 VPD PARKIN, DIXIE 1705 BAYSHORE DR FORT PIERCE FL 34949 SD DAVIS, VELMA 4164A GATOR TRACE VILLAS CIR FORT PIERCE FL 34982 SD YOUNG, ROSE 509 HOLLY AVE FORT PIERCE FL 34982 TD SCHURMANN, MARY ANN 1224 SOLTMAN AVE.	Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD HERI 2021 FORT VPD WILL 1435 FORT SD VAN 1009 FORT	DOITIONS/CHANGES TO OFFICERS AND MEN; H. TRIS STHIRL STREET PIERCE, FI 34950 S. JEANNE TE CAPTAINS WANKAPT. B PIERCE, FI 34950 der Lingt, Mary S. Heaver Canal Rd. PIERCE, FI 34943 CER, SHIRLEY GRAND VIOLD DIJ	Change Change Change	Addition Addition Addition Addition	

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:

772-461-3290