

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2000 8:00 am
Secretary of State

03-24-2000 90022 021 ****61.25

DOCUMENT # N93000000377

1. Entity Name

TRENTON ROTARY CLUB, INC.

Principal Place of Business

Mailing Address

THEODORE M. BURT
 114 NORTHEAST FIRST ST.
 TRENTON FL 32693

THEODORE M. BURT
 PO BOX 308
 TRENTON FL 32693-0308

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3141291

Applied For

Not Applicable

Zip

Country

Zip

Country

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

BURT, THEODORE M
 114 NORTHEAST FIRST ST.
 TRENTON FL 32693

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 PO ☐ Delete
 NAME PARRISH, TERRY
 STREET ADDRESS P O BOX 82/206 SE 5TH AVENUE
 CITY-ST-ZIP TRENTON FL 32693

TITLE Past President ☒ Change ☐ Addition
 NAME Parrish, Terry
 STREET ADDRESS P.O. Box 82
 CITY-ST-ZIP Trenton FL 32693

TITLE DVP ☐ Delete
 NAME BRYANT, TODD
 STREET ADDRESS 6489 S W CR 232
 CITY-ST-ZIP TRENTON FL 32693

TITLE President - Elect ☐ Change ☒ Addition
 NAME Guthrie, Scott
 STREET ADDRESS P.O. Box 1781
 CITY-ST-ZIP Trenton FL 32693

TITLE DPE ☐ Delete
 NAME FUGEL, PAULA
 STREET ADDRESS LOT 100 S GULF DRIVE P O BOX 92
 CITY-ST-ZIP SUWANNEE FL 32692

TITLE President ☒ Change ☐ Addition
 NAME Fugel, Paula
 STREET ADDRESS 8851 NW 27th Place
 CITY-ST-ZIP Chiefland, FL 32626

TITLE DSA ☐ Delete
 NAME FRAZIER, JOHN
 STREET ADDRESS 3539 S W 47TH COURT
 CITY-ST-ZIP BELL FL 32619

TITLE Vice President ☐ Change ☒ Addition
 NAME Buckley, Joanna
 STREET ADDRESS 9569 NW 38th Terr
 CITY-ST-ZIP Branford, FL 32008

TITLE DCS ☐ Delete
 NAME BRYANT, SUSAN
 STREET ADDRESS P O BOX 954/6770 S W 65TH STREET
 CITY-ST-ZIP TRENTON FL 32693

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DCS ☐ Delete
 NAME CLIFTON, WILLIAM
 STREET ADDRESS 515 SW 1ST STREET
 CITY-ST-ZIP TRENTON FL

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:

Paula F. Fugel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/00 352-463 3200

Date

Daytime Phone #