FILED

(883) 701-1054

Daytime Phone #

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 26, 2001 8:00 am Secretary of State DOCUMENT # N9500000170 1. Entity Name THE CONCERNED CITIZENS OF MULBERRY AND THE SURRO 04-26-2001 90104 050 ****61.25 Principal Place of Business Mailing Address P.O. BOX 134 P.O. BOX 134 MULBERRY FL 33860-0134 MULBERRY FL 33860-0134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0462157 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) TAYLOR, JULIE W 707 S.E. 3RD STREET MULBERRY FL 33860 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 re:nstating) 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Payable to FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE (10/00)☐ Change **2** Addition TAYLOR, JULIE W NAME NAME Brown Sandra STREET ADDRESS 707 S.E. 3RD STREET STREET ADDRESS 602 S.E. 5th Street Mulberry, FL 33860 CITY-ST-ZIP MULBERRY FL 33860 CITY-ST-ZIP Mulberry, TITLE ☐ Delete TITLE Addition ☐ Change NAME BOSTLE, WILLIE NAME Smith Ellestine 601 N.W. 2nd . Str Mulberry . FL 33 STREET ADDRESS 2225 3RD ST STREET ADDRESS CITY-ST-ZIP MULBERRY FL 33860 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition COURTEAU, ROBERT NAME NAME Lowe, Hazel 300 S.E. 9th Ave. STREET ADDRESS 371 LAKE ERIE LN STREET ADDRESS CITY-ST-ZIP MULBERRY FL 33860 CITY-ST-ZIP TITLE 💢 Delete TITLE ☐ Change Addition JOHNSON, DONNA NAME NAME Hunt Delons STREET ADDRESS 304 S.W. 3RD AVENUE STREET ADDRESS CITY-ST-ZIP MULBERRY FL 33860 CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME BAKER, ROOSEVELT NAME STREET ADDRESS **406 NW 1ST ST** STREET ADDRESS CITY-ST-ZIP MULBERRY FL 33860 CITY-ST-ZIP CHAP TITLE Delete ☐ Change ☐ Addition **BROOKS, CHARLES** NAME NAME STREET ADDRESS 706 S.E. 3RD STREET STREET ADDRESS CITY-ST-ZIP MULBERRY FL 33860 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 attackment with an address, with all other like empowered.