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

## DOCUMENT # N9700005627

1. Entity Name

THE WOODS AND WANTON CHAPTER, INC.



## FILED Apr 09, 2003 8:00 am Secretary of State

04-09-2003 90159 044 \*\*\*\*70.00

Principal Plac P.O. BOX 7658 TAMPA FL 336	_	Mailing Address P.O. BOX 76582 TAMPA FL 33675				80() AB()) 88()( 88)	11 <b>8 2 1</b> 11 <b>8 2</b> 184		II 18 <b>5</b> 1 1891			
2. Principal F	Place of Business	3. Mailing Address										
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES						
City & Stat	e	City & State				4. FEI Number 95-4438131 Applied				plied For		
Zip Country		Zip Cou		ntry			Not /		t Applicable			
						5. Certificate of Status Desired				Fee Required		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name							
HENDERSON, JOEY E												
12955 PRESTWICK DRIVE					Street Address (P.O. Box Number is Not Acceptable)							
RIVERVIEW FL 33569												
				City FL Zip Code						,		
	named entity submits this statement for ions of registered agent.	r the purpose of changing	its registere	d office or reg	gistere	ed agent, or both, in the	State of Florid	a. I am fan	iliar with,	and accept		
the obligat	iona of registerou agont.											
SIGNATURE .						<del> </del>	_		<del>"</del>			
****	Signature, typed or printed name of registered agent	and title if applicable. (N	OTE: Registered	Agent signature re	equired v	when reinstating)		DATE				
FILE NOW: FEE IS \$61.25  9. Election Ca Trust Fund			ampaign Fi d Contributio	~ —		\$5.00 May Be Added to Fees		Check F Departm				
10. OFFICERS AND DIRECTORS 11					Δ	L DDITIONS/CHANGES	TO OFFICERS	AND DIRE	CTORS IN	10		
TITLE	PD Delete IIII					<u> </u>	10 011102110		Change	Addition		
NAME	BELL, FRANK JR		NAME							ļ		
STREET ADDRESS CITY-ST-ZIP	3506 BELLE SHADOW LANE TAMPA FL 33634			T ADDRESS ST-ZIP						Ì		
TITLE	VD VD	Delete	TITLE				<del> </del>		Change	Addition		
NAME	REDDICK, LONNIE		NAME					_	•	_		
STREET ADDRESS CITY-ST-ZIP	19812 DEER HOLLOW LANE LUTZ FL 33549			T ADDRESS ST-ZIP								
TITLE	VD	☐ Delete	TITLE						Change	Addition		
NAME	CAROLINA, LEROY		NAME									
STREET ADDRESS CITY-ST-ZIP	1516 STORINGTON AVE. BRANDON FL 33511		STREE CITY-:	T ADDRESS ST-7IP								
TITLE	\$	Delete	TITLE			·····			Change	Addition		
NAME	SKINNER, FREDERICK J		NAME			•		_				
STREET ADDRESS CITY-ST-ZIP	2732 BILLINGHAN DRIVE			T ADDRESS ST-ZIP						Ì		
TITLE	LAND O' LAKES FL 34639 T	Delete	TITLE	31-216		<u></u>	<del>-</del>		Change	Addition		
NAME	HENDERSON, JOEY E	U Delete	NAME					L	_ ∧ımığı	M VOOITION		
STREET ADDRESS	12955 PRESTWICK DRIVE			T ADDRESS								
CITY-ST-ZIP	RIVERVIEW FL 33569		CITY-S	-	<b>T</b>				1 Chac	A a abb		
TITLE NAME		☐ Delete	TITLE NAME		1₩ 1044 N	SON, DON 5 JENNIF GO, FL 3:	- 0	٠ ـ ـ	] Change	Addition		
STREET ADDRESS			STREE	T ADDRESS	27	5 JENNIF	ER					
CITY-ST-ZIP			CITY-	ST-ZIP Z	AR	GO,FL3.	5774					

2. 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 litter like empowered.

SIGNATURE:

Jan Jan Jewe URE April 3, 2003 (813) 672-8707