

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

FILED
Feb 13, 2003 8:00 am
Secretary of State

02-13-2003 90256 011 ****61.25

DOCUMENT # N98000003573

1. Entity Name

GASPARILLA AQUATIC CLUB, INC.



Principal Place of Business

**2001 GASPARILLA RD. G 57
PLACIDA FL 33946**

Mailing Address

**2001 GASPARILLA RD. G 57
PLACIDA FL 33946**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0834140**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**KORP, WILLIAM
333 S. TAMiami TRAIL
STE. 199
VENICE FL 34284**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

| | | |
|----------------|--------------------------|--|
| TITLE | DP | <input checked="" type="checkbox"/> Delete |
| NAME | WILLIAMS, LEONARD C | |
| STREET ADDRESS | 2001 GASPARILLA RD. G57 | |
| CITY-ST-ZIP | PLACIDA FL 33946 | |
| TITLE | DV | <input type="checkbox"/> Delete |
| NAME | BEACH, GLADYS | |
| STREET ADDRESS | 2001 GASPARILLA RD. G 57 | |
| CITY-ST-ZIP | PLACIDA FL 33946 | |
| TITLE | DS | <input type="checkbox"/> Delete |
| NAME | SMITH, JOYCE | |
| STREET ADDRESS | 2001 GASPARILLA RD. G 57 | |
| CITY-ST-ZIP | PLACIDA FL 33946 | |
| TITLE | DT | <input type="checkbox"/> Delete |
| NAME | ZEED, VIRGINIA | |
| STREET ADDRESS | 2001 GASPARILLA RD. G 57 | |
| CITY-ST-ZIP | PLACIDA FL 33946 | |
| TITLE | D | <input checked="" type="checkbox"/> Delete |
| NAME | SCOLFIELD, MICHAEL J | |
| STREET ADDRESS | 2001 GASPARILLA RD. G 57 | |
| CITY-ST-ZIP | PLACIDA FL 33946 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | MYERS, COURTNEY III | |
| STREET ADDRESS | 2001 GASPARILLA RD, G57 | |
| CITY-ST-ZIP | PLACIDA FL 33946 | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|----------------|--------------------------|--|
| TITLE | DP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | CHARLES WIERMSA | |
| STREET ADDRESS | 2001 GASPARILLA Rd., G57 | |
| CITY-ST-ZIP | PLACIDA, FL 33946 | |
| TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | CHRISTINE MOSKI | |
| STREET ADDRESS | 2001 GASPARILLA Rd., G57 | |
| CITY-ST-ZIP | PLACIDA, FL 33946 | |
| TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | EILEEN PERRY | |
| STREET ADDRESS | 2001 GASPARILLA Rd., G57 | |
| CITY-ST-ZIP | PLACIDA, FL 33946 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> 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: *Virginia Zeed* **Feb 11, 2003 (941) 967-6394**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2F037 (10/02)