## **2002 UNIFORM BUSINESS REPORT (UBR)** FILED May 14, 2002 8:00 am § Secretary of State DOCUMENT # **N99000001583** 1. Entity Name FLORIDA WEST COAST RESOURCE CONSERVATION AND DEV 05-14-2002 90312 036 \*\*\*\*61.25 ELOPMENT COUNCIL, INC. Principal Place of Business . Mailing Address 11075 TAYLORGRADE ROAD. 14075-TAYLORGRADE ROAD DUETTE FL 33034-0806 DUETTE FL 33834 6866 2. Principal Place of Business 3. Mailing Address 945 25th Same Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For 31-1654804 Not Applicable Country Zip 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 CONNOR, JR, JOHN J Street Address (P.O. Box Number is Not Acceptable) 11075 TAYLOR GRADE ROAD **DUETTE FL 33834-6866** City 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. ۳/ SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make Check Pavable to FILE NOW: 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. TIT! F ☐ Delete TITLE Charles Hunsicker ☐ Change Addition (9/01 O'CONNOR JR, JOHN J NAME NAME P. O. BOX-1000 11075 TAYLOR GRADE RD STREET ADDRESS STREET ADDRESS 72 Bradenton 34206 DUETTE FL 33834-6866 CITY-ST-ZIP CITY-ST-ZIP Richard Van Delete Mine Morris TITLE ☐ Change M Addition NAME NAME Lorraine Rd 816 Tara Wood Lane #19 VALLEY DR STREET ADDRESS STREET ADDRESS Bradenton BRANDON FL 33510 34202 CITY-ST-ZIP Valrico FL 33594 CITY-ST-ZIP Wike Sosadeder TITLE 😘 🔊 ै 🛪 - - - - Addition UNDERHILL, TODD NAME NAME 200 S. Washington Blud. #10 6408 GOLDGFINCH ST STREET ADDRESS STREET ADDRESS SARASOTA FL 34241 CITY-ST-ZIP CITY-ST-ZIP Sarasota TITLE ☐ Delete TITLE ☐ Change Addition TOMPKINS II, H CHRISTOPHER NAME NAME 1706 SOUTH KING AVE STREET ADDRESS STREET ADDRESS BRANDON FL 33511-6216 CITY-ST-ZIP CITY-ST-ZIP NONE TITLE ☐ Delete TITLE Change ☐ Addition GIBBONS, DEVON NAME NAME STREET ADDRESS 773 BAY VISTA ROAD S STREET ADDRESS SAINT PETERSBURG FL 33705 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

**SIGNATURE:** 

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/02

941-723-

Daytime Phone #