

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2000 8:00 am
Secretary of State
 04-10-2000 90162 048 ***158.75

DOCUMENT # P97000004029

1. Entity Name

AVON PARK BINGO INC.

Principal Place of Business

**1091 MAIN STREET
 AVON PARK FL 33831**

Mailing Address

**3223 NO LOCKWOOD RIDGE ROAD LOT 198
 SARASOTA FL 34234-6540**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0705455

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

**PINTZOW, HERMAN
 3223 NO LOCKWOOD RIDGE ROAD LOT 198
 SARASOTA FL 34234-6540**

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

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2000 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DPS DTS** ☐ Delete
 NAME **PINTZOW, HERMAN**
 STREET ADDRESS **3223 N. LOCKWOOD RIDGE RD., LOT 198**
 CITY-ST-ZIP **SARASOTA FL 34234**

TITLE **DTS** ☒ Change ☐ Addition
 NAME **PINTZOW HERMAN**
 STREET ADDRESS **3223 N. LOCKWOOD RIDGE RD #198**
 CITY-ST-ZIP **SARASOTA FL 34234**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition
 NAME **GUMIENNY, RT. REV. MSEA RO**
 STREET ADDRESS **5011 VILLAGE GARDENS DRIVE**
 CITY-ST-ZIP **SARASOTA FL 34234**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **P** ☐ Change ☒ Addition
 NAME **TAYLOR, TIMOTHY R.**
 STREET ADDRESS **5011 VILLAGE GARDENS DRIVE**
 CITY-ST-ZIP **SARASOTA, FL 34234**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

HERMAN PINTZOW
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-27-00 941-727-5225
 Date Daytime Phone #

CR2E034 (9/99)