2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 15, 2002 8:00 am

DOCUMENT # P97000004029							Secretary of Sta		
1. Entity Name					1			0066 044 ***158.	
AVON PAR	K BINGO INC.								
Principal Place of Business				. LOCKWO	OOD RIDGE # 1	198			
1091 MAIN AVON PAR	STREET K, FL 33831		SARAS	SOTA, FL 3	4234				
2. Principal Place of Business			3. Mailing A	ddress					
Suite, Apt. #, etc.			Suite, Ap	t. #, etc.		DO NOT	DO NOT WRITE IN THIS SPACE		
City & State			City & Sta	ate		4. FEI Number 65-0705455		Applied For Not Applicable	
Zip	.a Cour	rtry	Zip		Country	5. Certificate of Status I	Desired X \$8.75		
(6. Name and Addr	ess of Curre	ent Registered A	vgent	Name	7. Name and Address of	New Registered A	gent	
HERMAN PINTZOW									
3223 N. LOCKWOOD RIDGE RD. LOT 198 SARASOTA FL 34234					Street Addre	rss (P.O. Box Number is Not A	cceptable)		
i !									
 	•				City		FL	Zip Code	
8. The above	named entity subm	its this state	ment for the purp	ose of changir	ng its registered offi	ice or registered agent, or both	, in the State of Flor	ida.	
SIGNATURE	Signature, typed or pr	inted name of	registered agent or	nd title if annlicat	hle (NOTE: Pagis	tered Agent signature required whe	n neinetatina)	Date	
9. This corpo	ration is eligible to s		100000000000000000000000000000000000000		FEE IS \$150.00	10. Election Campa		\$5.00	
gible Tax fi	iling requirement an	=	o so.	MAY45200	0 Fee(will) be \$550 e to Department of	00 Trust Fund Cont		Be Added to Fees	
11.		OFFICERS A	ND DIRECTORS			ADDITIONS/CHANGES TO OF	FICERS AND DIRE	CTORS IN 11	
TITLE	PTT HERMAN PIN	[7()\/		Delete	TITLE ,		Change	Addition of	
NAME STREET ADDRESS	2222 N. LOCIONOCO DIDOC DO LOT 400				STREET ADDRESS			Addition 6	
CITY - ST - ZIP	SARASOTA, F	L 34234		Delete	TITLE #		Change	Addition 8	
NAME	REBECCA J. PINTZOW				NAME				
STREET ADDRESS	DADAGOTA EL 04004			OT 198	STREET ADDRESS				
CITY - ST - ZIP	SARASUTA, F	L 34234		Delete	TITLE	<u>, , , , , , , , , , , , , , , , , , , </u>	Change	Addition	
NAME					NAME				
STREET ADDRESS					STREET ADDRESS	•			
CITY - ST - ZIP				Delete	TITLE		Change	e Addition	
TITLE NAME				Delete	NAME :		Change	, Landada	
STREET ADDRESS					STREET ADDRESS				
CITY - ST - ZIP	 			1 1	CITY - ST - ZIP				
TITLE				Delete	TITLE		Change	Addition	
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CITY - ST - ZIP					CITY - ST - ZIP				
TITLE				Delete	TITLE :		Change	Addition	
NAME					NAME			.]	
STREET ADDRESS					STREET ADDRESS				
CITY - ST - ZIP 13. I hereby ce	rtify that the informa	tion supplie	d with this filing d	loes not qualify	y for the exemption	stated in Section 119.07(3)(i).	Florida Statutes. I fu	irther certify that the	
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 eath; 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 appe	ears in Block 11 or E			-01		all other like empowered.	י בועם	~, ~,	
SIGNAT	URE:		enman (DAME OF SIG			≥ 94F30		
	SIGN	VIOKE WAD I	1 - ED OK PKINI EI	UNAME OF SIG	NING OFFICER OR D	IRECTOR Date	9	Daytime Phone #	