

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90829 040 ***158.75

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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

P.O. BOX 1816

Suite, Apt. #, etc.

Suite, Apt. #, etc.

BERLIN, MD.

City & State

City & State

BERLIN, MD.

Zip

Country

Zip

Country

21811-5816

4. FEI Number

65-0705455

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

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. 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 \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Delete
NAME
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CITY-ST-ZIP

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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 607, 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: Herman Pintzow HERMAN PINTZOW 4/25/03 410-208-6908

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)