

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 744056

1. Entity Name

CITIZENS FOR THE OLD LUTZ SCHOOL BUILDING, INC.

FILED

Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90106 005 ****61.25

Principal Place of Business

18819 U.S. HIGHWAY NO. 41
LUTZ FL 33549
US

Mailing Address

202 W. LUTZ LAKE FERN ROAD
LUTZ FL 33549-4202

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2945889

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

HOEDT, PHYLLIS J.
202 W. LUTZ LAKE FERN ROAD
LUTZ FL 33549

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

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME HOEDT, WILLIAM
STREET ADDRESS 202 W LUTZ LAKE FERN RD
CITY-ST-ZIP LUTZ, FLORIDA 00000

TITLE D ☐ Change ☒ Add
NAME Beth A. Nevel
STREET ADDRESS 18602 San Rio Circle
CITY-ST-ZIP Lutz Fl. 33549

TITLE P ☐ Delete
NAME HOEDT, PHYLLIS J.
STREET ADDRESS 202 W LUTZ LAKE FERN ROAD
CITY-ST-ZIP LUTZ, FLORIDA 00000

TITLE D ☐ Change ☒ Add
NAME Jo Van Bebbet
STREET ADDRESS 301 DeBuel Road
CITY-ST-ZIP Lutz, Fl. 33549

TITLE D ☒ Delete
NAME MARROW, SANDRA A.
STREET ADDRESS 19107-1ST STREET, N.E.
CITY-ST-ZIP LUTZ, FLORIDA 00000

TITLE D ☐ Change ☒ Add
NAME Lawrence W. R. Hoedt
STREET ADDRESS 1312 - 151st Ave.
CITY-ST-ZIP Lutz, Fl. 33549

TITLE D ☐ Delete
NAME BUCKINGHAM, AURALEE
STREET ADDRESS 19216 BLOUNT ROAD
CITY-ST-ZIP LUTZ FL

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

TITLE D ☐ Delete
NAME NEVEL, BEN
STREET ADDRESS 18602 SAN RIO CIRCLE
CITY-ST-ZIP LUTZ FL

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

TITLE T ☐ Delete
NAME PITTMAN, ELAINE
STREET ADDRESS 105 2ND AVE SE
CITY-ST-ZIP LUTZ FL 33549

TITLE ☐ Change ☐ Add
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

Phyllis J. Hoedt 1-8-00 813-949-1931

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #