

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 743827

1. Entity Name

CANADIAN-FRANCO-AMERICAN CLUB, ST. PETERSBURG, I

Principal Place of Business

4265 13 AVE N  
ST. PETERSBURG FL 33713  
US

Mailing Address

17117 GULF BLVD  
APT 627  
NO. REDINGTON BEACH FL 33708-1482  
US

2. Principal Place of Business

3. Mailing Address

5900 Shore Blvd S.

Suite, Apt. #, etc.

Diplomat Bldg. Apt. 507

City & State

Gulfport

Zip

33707

Country

Florida U.S.

6. Name and Address of Current Registered Agent

VAILLANCOURT, ROBIN A.  
2530 WEST BAY DRIVE  
LARGO, FL MH 34640

7. Name and Address of New Registered Agent

Name

GENDRON RACHEL

Street Address (P.O. Box Number is Not Acceptable)

121 BUTTERNWOOD CIRCLE

(727)

TEL: 392-3002

City

SEMINOLE

FL

Zip Code

33777

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

Rachel M. Gendron  
Rachel M. Gendron

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/28/00

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

TITLE	VP	<input type="checkbox"/> Delete
NAME	VALLE, JEAN-PAUL	
STREET ADDRESS	770-32ND AVE., SOUTH #218	
CITY-ST-ZIP	ST. PETERSBURG FL 33705	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	BOILEAU, EUGENIE	
STREET ADDRESS	17117 GULF BLVD, 627	
CITY-ST-ZIP	N REDDINGTON BCH FL	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	VAILLANCOURT, JACQUES	
STREET ADDRESS	3100 26TH AVE, NORTH, LOT 22	
CITY-ST-ZIP	ST. PETERSBURG FL 33713	
TITLE	D	<input type="checkbox"/> Delete
NAME	FOURNIER, ROMEO	
STREET ADDRESS	4050 4TH STREET, NORTH	
CITY-ST-ZIP	ST. PETERSBURG FL 33703	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	GUAY, ALINE	
STREET ADDRESS	12400 US 19 NORTH, LOT 44	
CITY-ST-ZIP	ST. PETERSBURG FL 33764	
TITLE	D	<input type="checkbox"/> Delete
NAME	DAVIS, THERESE	
STREET ADDRESS	10780 - 43TH STREET., APT 701	
CITY-ST-ZIP	CLEARWATER FL 33762	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TD	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HUOT, Nicole	
STREET ADDRESS	5900 Shore Blvd. S. Apt 507	
CITY-ST-ZIP	GULFPORT, FL 33707	
TITLE	P	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAUCHY, MARGOT	
STREET ADDRESS	38 TIFFIN WAY	
CITY-ST-ZIP	LARGO FL 33773	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARNEAU, MARCEL	
STREET ADDRESS	4050 4th. STREET NORTH #226	
CITY-ST-ZIP	ST. PETERSBURG FL. 33703	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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

MARCEL GARNEAU  
MARCEL GARNEAU

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/28/2000

Date

Daytime Phone #

FILED  
Apr 05, 2000 8:00 am  
Secretary of State

04-05-2000 90066 010 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE  
Applied For ☐  
Not Applicable ☐

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

CR2E037 (9/99)