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## **2001 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment

SIGNATURE:

## Mar 13, 2001 8:00 am DOCUMENT # 721237 Secretary of State 1. Entity Name 03-13-2001 90111 045 \*\*\*\*61.25 FLORIDA STATE BEEKEEPERS ASSOCIATION, INCORPORAT Principal Place of Business Mailing Address 389 S CENTRALAVE 389 S CENTRALAVE **UMATILLA FL 32784 UMATILLA FL 32784** 2. Principal Place of Business 3. Mailing Address 15 PATTEN HEIGHTS ST 15 PATTEN HEIGHTS ST Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For 59-1776440 LAKEL FLORIDA +LORIDA PRELAND Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33803-2248 IJŚA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Florida State Beekeepers Association Street Addi Robert H. Kelley, Treasurer RANDALL, CHARLOTTE 389 S CENTRAL AVE 115 Patten Heights St. UMATILLA FL 32784 Lakeland, FL 33803-2248 City 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. Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. **Department of State** FEE IS \$61.25 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE Change Addition RUSSELL, CAROL NAME NAME STREET ADDRESS STREET ADDRESS 1274 PRESQUS ISLE DR CITY-ST-ZIP CITY-ST-ZIP PORT CHARLOTTE FL DIRECTOR NO THE Change ☐ Addition TITLE TITLE RANDALL, CHARLOTTE NAME NAME STREET ADDRESS STREET ADDRESS 389 S CENTRAL AVE CITY-ST-ZIP CITY-ST-ZIP UMATILLA FL PRESIDENT TITLE ☐ Delete TITLE X Change Addition HERMAN, ELMORE NAME -STREET ADDRESS STREET ADDRESS PO BOX 381 CITY-ST-ZIP CITY-ST-ZIP WINTER HAVEN FL ☐ Delete TREASURE OX Change TITLE ☐ Addition TITLE NAME KELLEY, ROBERT H NAME STREET ADDRESS STREET ADDRESS 115 PATTEN HEIGHTS CITY-ST-ZIP CITY-ST-ZIP LAKELAMD FL ☐ Delete Change ☐ Addition TITLE TITLE NAME WESTERVELT, JOHN NAME STREET ADDRESS 13828 YALE HAMMOCK RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP UMATILLA FL DIRECTOR TITLE ☐ Delete TITLE Change ☐ Addition RUSSELL, EARL C NAME STREET ADDRESS STREET ADDRESS 1274 PRESQUE ISLE DR CITY-ST-ZIP CITY-ST-ZIP PORT CHARLOTTE FL 12. I hereby certify that the information supplied with this filing does not qualify I indicated on this report or supplemental report is true and accurate and that , Florida Statutes. I further certify that the information as if made under oath; that I am an officer or director; and that my name appears in Block 10 or Block 11 if Robert Kelley 115 Patten Heights St. of the corporation or the receiver or trustee empowered to execute this repo

Lakeland, FL 33803-2248

ER OR DIRECTOR