

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000004318

1. Entity Name

THE VILLAGE OF MANY TRIBES, INC.

FILED

Mar 25, 2002 8:00 am  
Secretary of State

03-25-2002 90192 050 \*\*\*\*70.00

Principal Place of Business

140 SHELL HARBOUR ROAD  
SUITE A  
SATSUMA FL 32189  
US

Mailing Address

140 SHELL HARBOUR ROAD  
SUITE A  
SATSUMA FL 32189  
US

2. Principal Place of Business

714 ST Johns Av  
Suite, Apt. #, etc.

3. Mailing Address

1208 S. Hwy 17  
Suite, Apt. #, etc.

City & State

Palatka FL

City & State

Satsuma FL

4. FEI Number

59-3414335

Applied For

Not Applicable

Zip

32177

Country

Putnam

Zip

32189

Country

Putnam

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

VANDEVENTER, DONALD J  
140 SHELL HARBOUR ROAD  
SUITE A  
SATSUMA FL 32189

1208 S. Hwy 17

7. Name and Address of New Registered Agent

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

TITLE P ☐ Delete  
NAME VANDEVENTER, DONALD J  
STREET ADDRESS 140 SHELL HARBOUR ROAD, SUITE A  
CITY-ST-ZIP SATSUMA FL 32189

TITLE ST ☐ Delete  
NAME VANDEVENTER, GAIL H  
STREET ADDRESS 140 SHELL HARBOR RD SUITE A  
CITY-ST-ZIP SATSUMA FL 32189

TITLE VP ☒ Delete  
NAME VANDEVENTER, JESSE C  
STREET ADDRESS 140 SHELL HARBOR RD SUITE A  
CITY-ST-ZIP SATSUMA FL 32189

TITLE D ☒ Delete  
NAME JACKSON, MICHAEL R  
STREET ADDRESS S HWY 17  
CITY-ST-ZIP SATSUMA FL 32189

TITLE D ☐ Delete  
NAME HENDERSON, THOMAS E  
STREET ADDRESS 8811 S ORANGE AVENUE  
CITY-ST-ZIP ORLANDO FL 32824

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1208 S Hwy 17  
CITY-ST-ZIP SATSUMA FL 32189

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1208 S Hwy 17  
CITY-ST-ZIP SATSUMA FL 32189

TITLE VP ☐ Change ☒ Addition  
NAME THOMAS ABRIGONI  
STREET ADDRESS 140 SHELL HARBOUR RD  
CITY-ST-ZIP SATSUMA, FL 32189

TITLE D ☐ Change ☒ Addition  
NAME FRANCIS PALMERO  
STREET ADDRESS CLEARWATER DR  
CITY-ST-ZIP E. PALATKA, FL 32177

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

TITLE D ☐ Change ☒ Addition  
NAME JESSE VAN DEVENTER  
STREET ADDRESS 1208 S Hwy 17  
CITY-ST-ZIP SATSUMA, FL 32189

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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)