

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90084 013 ***150.00

DOCUMENT # P00000075189

1. Entity Name
ROD'N REEL ASSOCIATION, INC.



Principal Place of Business

~~10842 LAKE HARRIS CIR.~~ **32009 Harris Rd**
TAVARES FL 32778

Mailing Address

~~10842 LAKE HARRIS CIR.~~ **32009 Harris Rd**
TAVARES FL 32778

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2470818**

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

STEVEN J. RICHEY, P.A.
1009 N. 14TH ST.
LEESBURG FL 34749-2460

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 NAME STREET ADDRESS CITY - ST - ZIP	S RATTRAY, KATHY MRS 10915 LAKE HARRIS CIR TAVARES FL 32778	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P RATTRAY, DAVID 10915 LAKE HARRISCIR TAVARES FL 32778	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP VMPRESS, JOAN MRS 31932 ELIZABETH LANE TAVARES FL 32778	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BOGGUS, WENDI MRS 32009 HARRIS RD TAVARES FL 32778	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Wilson, Chris 31925 Tracy Lane Tavares, FL 32778	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Hunt, Norman 31923 Elizabeth Lane Tavares, FL 32778	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director Umphress, John	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treasurer Boggus, Wendi U	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Secretary Comello, Carol 10836 Lake Harris Cr Tavares, FL 32778	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director Vierling, Frank 10840 Jackie Lane Tavares, FL 32778	☐ Change ☒ Addition

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: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/9/03 352-742-0896

CR2E034 (10/02)