

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

04-11-2003 90193 049 ****61.25

DOCUMENT # 765358



1. Entity Name

RUSKIN-APOLLO BEACH ROTARY CLUB, INC.

Principal Place of Business

Mailing Address

P O BOX 1765
5908 FORTUNE PLACE
RUSKIN FL 33570
US

P. O. BOX 1765
5908 FORTUNE PLACE
APOLLO BEACH FL 33572-2643
US

55040332



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2833997**

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

GLISSON, DAMON C., ESQ.
5908 FORTUNE PLACE
APOLLO BEACH FL 33570

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 \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VD** ☒ Delete
NAME **DEMASK, CRAIG**
STREET ADDRESS **10229 ALLENWOOD DR**
CITY-ST-ZIP **RIVERVIEW FL 33569**

TITLE **VD** ☐ Change ☒ Addition
NAME **JAMES AD COCK**
STREET ADDRESS **8944 Highway 41N**
CITY-ST-ZIP **TECO, FL 33572**

TITLE **PD** ☐ Delete
NAME **HARBURG, JERRY**
STREET ADDRESS **11550 US HWY 41 S**
CITY-ST-ZIP **GIBSONTOWN FL 33534**

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

TITLE **TD** ☐ Delete
NAME **WHIDDEN, ELIZABETH**
STREET ADDRESS **103 FLAMINGO DR**
CITY-ST-ZIP **APOLLO BEACH FL 33572**

TITLE **TD** ☒ Change ☐ Addition
NAME **Elizabeth Whidden**
STREET ADDRESS **117 Flamingo Drive**
CITY-ST-ZIP **Apollo Beach FL 33572**

TITLE **SD** ☐ Delete
NAME **BURDICK, SHEILA**
STREET ADDRESS **301 US HWY 41 NORTH**
CITY-ST-ZIP **RUSKIN FL 33570**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

SIGNATURE OF BURDICK

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/03

Date

Daytime Phone #

CR2E037 (10/02)