

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 24, 2001 8:00 am**  
**Secretary of State**

04-24-2001 90351 005 \*\*\*\*61.25

**DOCUMENT # 700005**

1. Entity Name

**PEACE RIVER AND PALM SHORES SOCIAL CLUB, INC.**

Principal Place of Business

Mailing Address

29075 RIVERVIEW LANE  
 PUNTA GORDA FL 33982-8535

29075 RIVERVIEW LANE  
 PUNTA GORDA FL 33982-8535

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

**59-2344981**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**COY, EUGENE**  
**285 EVERGREEN STREET**  
**PUNTA GORDA FL 33982**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	COY, EUGENE	
STREET ADDRESS	285 EVERGREEN ST	
CITY-ST-ZIP	PUNTA GORDA FL	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	SMITH, LINDA	
STREET ADDRESS	471 RIDGECREST DR	
CITY-ST-ZIP	PUNTA GORDA FL 33982	
TITLE	T	<input type="checkbox"/> Delete
NAME	PHILLIPS, JACK	
STREET ADDRESS	29260 ALFARETTA	
CITY-ST-ZIP	PUNTA GORDA FL 33982	
TITLE	D	<input type="checkbox"/> Delete
NAME	ALDRICH, BVD	
STREET ADDRESS	28411 COCO PALM DR.	
CITY-ST-ZIP	PUNTA GORDA FL 33982	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	NORRIS, WILLIAM	
STREET ADDRESS	28482 SILVER PALM DRIVE	
CITY-ST-ZIP	PUNTA GORDA FL 33982	
TITLE	D	<input type="checkbox"/> Delete
NAME	PLATONITIS, TOM	
STREET ADDRESS	29184 PICADOR ST	
CITY-ST-ZIP	PUNTA GORDA FL 33982	

TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RANDALL JENKINS	
STREET ADDRESS	29263 PEACE RIVER SHORES BLVD	
CITY-ST-ZIP	PUNTA GORDA, FL 33982	
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COY, EUGENE	
STREET ADDRESS	285 EVERGREEN ST.	
CITY-ST-ZIP	PUNTA GORDA, FL 33982	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SANDRA LAVOIE	
STREET ADDRESS	29263 PEACE RIVER SHORES BLVD.	
CITY-ST-ZIP	PUNTA GORDA, FL 33982	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOSEPH BROWN	
STREET ADDRESS	261 SUMMERSET DR.	
CITY-ST-ZIP	PUNTA GORDA, FL 33982	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CHARLES ARNEY	
STREET ADDRESS	29197 BOYCE RD.	
CITY-ST-ZIP	PUNTA GORDA, FL 33982	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HAPPY MEREDITH	
STREET ADDRESS	28498 Silver Palm Dr	
CITY-ST-ZIP	PUNTA GORDA, FL 33982	

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: *Sandra Lavoie*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-01-01 941-255-7403  
 Date Daytime Phone #

CR2E037 (10/00)