2000 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 28, 2000 8:00 am Secretary of State DOCUMENT # 703166 1. Entity Name THE GLADES COUNTY FISH AND GAME CLUB, INC. 02-28-2000 90011 033 ****61.25 Principal Place of Business Mailing Address PO BOX 426 PO ROX 426 MOORE HAVEN FL 33471 MOORE HAVEN FL 33471-0426 <u>ิ คักกรี่ 2</u>(10 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0220453 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) ramuni, steven a esq 150 SOUTH MAIN STREET Labelle FL 33935 Zip Code 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Pavable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. President ☐ Addition Change ☐ Delete TITLÉ Dennis Gr. Ffin 1115 FOX MOOR ST. NAME TOMS, TOMMY STREET ADDRESS STREET ADDRESS 300 AVE 0 MOORE HAVEN FL 33471 CITY-ST-ZIP CITY-ST-ZIP MOORE HAVEN FL 33471 Change ☐ Addition □ Delete TITLE STEWART, Johnny ROAD 340 OLD NORTH RIVER ROAD NAME Griffin, Dennis NAME STREET ADDRESS STREET ADDRESS 1115 FOXMOOR ST. LABELLE FL 33935 CITY-ST-ZIP CITY-ST-ZIP MOORE HAVEN FL 33471 ☐ Addition ST TITLE ST ☐ Delete TITLE ☐ Change Hughes, Norm AN 370 PARK AUE ESE NAME HUGHES, NORMAN NAME STREET ADDRESS STREET ADDRESS 370 PARK AVE E.S.E. MOORE HAVEN FL 3347/ CITY-ST-ZIP CITY-ST-ZIP MOORE HAVEN FL 33471 DAVE McGee 300 RAILROAD AVE ☐ Addition ☐ Delete Change TITLE ZEIGLER, HARRY NAME STREET ADDRESS STREET ADDRESS 2020 OLD LAKE PORT ROAD Moore Howen FL 3347/ CITY-ST-ZIP CITY-ST-ZIP MOORE HAVEN FL 33471 TITLE ☐ Change ■ Addition ☐ Delete TITLE STEWART, JOHNNY NAME NAME STREET ADDRESS STREET ADDRESS 340 OLD NORTH RIVER ROAD Moore Howen FC 3347/ CITY-ST-ZIP CITY-ST-ZIP Labelle fl 33935 TITLE Change Addition Delete TITLE NAME NAME STREET ADDRESS

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.

CiTY-ST-ZIP

STREET ADDRESS

City-St-7IP