

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 703958

1. Entity Name

LA-WEST FISHING CLUB, INC.

FILED

Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90097 002 ****61.25

Principal Place of Business

Mailing Address

P.O. BOX 961
C/O FRANK JONES
OPELIKA AL 36803
US

P.O. BOX 961
C/O FRANK JONES
OPELIKA AL 36803
US

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

63-0978859

Applied For

Not Applicable

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

MILLER, WILTON R.
201 S MONROE ST. #500
TALLAHASSEE FL 32301

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 ☐ Delete
NAME PT
STREET ADDRESS BROWN, ORRIN
CITY-ST-ZIP 611 N. 9TH STREET
OPELIKA AL 36801

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

TITLE ☐ Delete
NAME STT
STREET ADDRESS JONES, FRANK
CITY-ST-ZIP 909 LAKESHORE AVE
OPELIKA AL 36801

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

TITLE ☐ Delete
NAME T
STREET ADDRESS PHILLIPS, JODY
CITY-ST-ZIP 1102 WILLOW RUN
OPELIKA AL 36801

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

TITLE ☐ Delete
NAME T
STREET ADDRESS WILSON, RONNIE
CITY-ST-ZIP 1002 SHELBY AVENUE
OPELIKA AL 36801

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

TITLE ☐ Delete
NAME VT
STREET ADDRESS JERNIGAN, CHARLES
CITY-ST-ZIP 1115 E. COLLINWOOD CIRCLE
OPELIKA AL 36801

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

TITLE ☐ Delete
NAME VT
STREET ADDRESS JACKSON, CARSON
CITY-ST-ZIP 519 TERRACWOOD DRIVE
OPELIKA AL 36801

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: *Frank Jones*

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-14-02 334-749-8306

CR2E037 (9/01)