

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 704191

1. Entity Name

SENIOR CITIZENS CLUB LANTANA, FLORIDA, INC.

Principal Place of Business

IRIS AND DIXIE
BOX 3303
LANTANA FL 33465-3303

Mailing Address

IRIS AND DIXIE
BOX 3303
LANTANA FL 33465-3303

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

NOT APPLICABLE

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

HAND, ROBERT D
896 N. FEDERAL HWY
#432
LANTANA FL 33462

Name

ANNE JOHNSON

Street Address (P.O. Box Number is Not Acceptable)

1127 PINEWAY

City

LANTANA

FL

Zip Code

33462

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

ANNE JOHNSON

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/8/01

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

TITLE P
NAME HAND, JANE
STREET ADDRESS 896 N. FEDERAL HWY #432
CITY-ST-ZIP LANTANA FL 33462 ☐ Delete

TITLE V
NAME ANTONETTE, TERRY
STREET ADDRESS 229 N. K ST
CITY-ST-ZIP LAKE WORTH FL ☐ Delete

TITLE RS
NAME LINDSTROM, BARBARA
STREET ADDRESS 703 N 4TH ST
CITY-ST-ZIP LANTANA FL ☐ Delete

TITLE T
NAME KRUPILIS, JOHN
STREET ADDRESS 6873 VENETIAN DR
CITY-ST-ZIP LANTANA FL ☒ Delete

TITLE D
NAME VITO, LEONE
STREET ADDRESS 1 N GOLFVIEW # 203
CITY-ST-ZIP LAKE WORTH FL ☐ Delete

TITLE D
NAME YORK, ANN
STREET ADDRESS 202 S O ST
CITY-ST-ZIP LAKE WORTH FL ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE T
NAME HAND, ROBERT
STREET ADDRESS 896 N. FEDERAL HWY #432
CITY-ST-ZIP LANTANA FL 33462 ☒ Change ☐ Addition

TITLE ☐ Change ☐ Addition
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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jan 20, 2001 8:00 am
Secretary of State

01-20-2001 90020 006 ****61.25



DO NOT WRITE IN THIS SPACE

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CR2E037 (10/00)