2002 UNIFORM BUSINESS REPORT (UBR)

FILED Jul 25, 2002 8:00 am **Secrétary of State**

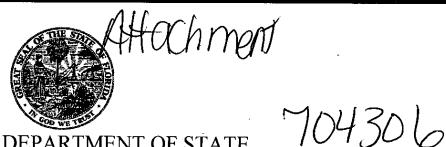
DOCUMENT # 704306 07-25-2002 90125 046 ****61.25 BAY RIDGE TERRACE CIVIC ASSOCIATION, INCORPORATE Principal Place of Business Mailing Address 11533 69TH AVE マペペエむ 11533 69TH AVE NORTH NORTH SEMINOLE FL 33772 SEMINOLE FL 33772 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1035184 Ziρ Not Applicable Country Zip Country 5. Certificate of Status Desired \$8.75 Additional 6. Name and Address of Current Registered Agent. Fee Required 7. Name and Address of New Registered Agent Name HANDY, JOHN K Street Address (P.O. Box Number is Not Acceptable) 11533 69TH AVE N. SEMINOLE FL 33772 City 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 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ☐ Delete TITLE NAME BREDESTEGE, LARRY Addition NAME STREET ADDRESS 11219 66TH TERR. NORTH STREET ADDRESS CITY-ST-7IP Seminole fl 33772 CITY-ST-ZIP TITLE ☐ Delete TITLE GILL, JOE ☐ Change ☐ Addition NAME STREET ADDRESS 6400 114TH ST.NO. STREET ADDRESS CITY-ST-719 SEMINOLE FL 33772 CITY-ST-ZIP TÜLE Delete TITLE HANDY, JOHN K NAME ☐ Change Addition NAME STREET ADDRESS 69TH AVE N. 11533 STREET ADDRESS CITY-ST-ZIP SEMINOLE FL CITY-ST-ZIP TITLE Delete TITLE BRUNSGAARD, JAMES MALIE EDWARD MCAFFERY Change ☐ Addition NAME STREET ADDRESS 6500 114TH ST., N STREET ADDRESS CITY-ST-ZIP SEMINOLE FL CITY-ST-ZIP 33772 TITLE Delete TITLE LEVERENTZ, MARY NAME Change ☐ Addition NAME STREET ADDRESS 11585 65 AVE N. STREET ADDRESS CITY-ST-ZIP Seminole fl CITY-ST-ZIP CHARLES BEAMS ☐ Delete TITLE NAME ☐ Change ☐ Addition NAME STREET ADDRESS SEMINOLE FL. 33772 STREET ADDRESS CITY-ST-7IP 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 suppliemental 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

a 45 a riudo R HAHOT G OFFICER OR DIRECTOR

(9/01



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

July 15, 2002

BAY RIDGE TERRACE CIVIC ASSOCIATION, INCORPORATED 11533 69TH AVE NORTH SEMINOLE, FL 33772 US

Subject: BAY RIDGE TERRACE CIVIC ASSOCIATION, INCORPORATED

Reference Number:

704306

Please be advised, we have received your annual report/uniform business report; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Florida nonprofit corporations are required to have at least 3 directors or trustees. Please place the letter "D" or "T" beside the names and business addresses of each director or trustee.

Please sign and return your check submitted with the annual report/uniform business report.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 daysfrom the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/rg ANNUAL REPORTS SECTION