

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 705183

1. Entity Name

SOUTH PASADENA CIVIC ASSOCIATION, INC.

Principal Place of Business

7047. SUNSET DR
1868 SHORE DRIVE, SOUTH #305
S. PASADENA FL 33707

Mailing Address

C/O AGNES STEBELTON
1868 SHORE DR SO. #311
S. PASADENA FL 33707-4635

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

59-2018775

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

O'LEARY, DONALD M
4753 CENTRAL AVENUE
ST PETERSBURG FL 33713

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 VD ☐ Delete
NAME MAYHEW, VERA
STREET ADDRESS 1868 SHORE DR SO #35
CITY-ST-ZIP S. PASADENA FL 33707

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

TITLE PD ☐ Delete
NAME STEBELTON, AGNES
STREET ADDRESS 1868 SHORE DR SO 311
CITY-ST-ZIP SOUTH PASADENA FL

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

TITLE VD ☐ Delete
NAME STAJICH, SIBYLLE
STREET ADDRESS 1847 SHORE DR SO, #315
CITY-ST-ZIP S. PASADENA FL

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

TITLE VD ☒ Delete
NAME CLARKE, MARY
STREET ADDRESS 1868 SHORE DR SO APT. 605
CITY-ST-ZIP SOUTH PASADENA FL

TITLE VD ☐ Change ☒ Addition
NAME MARY Eidel
STREET ADDRESS 7050 SUNSET DR #1215
CITY-ST-ZIP South Pasadena, FL 33707

TITLE SD ☐ Delete
NAME WINANS, GERALDINE M.
STREET ADDRESS 6924 SOUTH SHORE DR. SO.
CITY-ST-ZIP S. PASADENA FL

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

TITLE TD ☐ Delete
NAME HELD, ALMA
STREET ADDRESS 7700 SUN ISLAND DR. #601
CITY-ST-ZIP S. PASADENA FL

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:

Agnes Stebelton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90142 024 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)