## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # 706777

1. Entity Name

## APACHE CLUB OF HERNANDO INC



## FILED Mar 10, 2003 8:00 am Secretary of State

03-10-2003 90744 044 \*\*\*\*61.25

AI AOI IL	OLOD OF TILINAMOO INC		N. T. S.	9				
4789 N APACHE TRL. 478		Mailing Address 4789 N APACHE TRL. HERNANDO FL 34442 US		)	ŽIJOJ JADIS SEDIJ JOEC DISKS DEDELJ	818ki 818ki 818	HI <b>1</b> 1111   1 <b>11</b> 11	
2. Principal	Place of Business :	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State		4. FEI Number 59-2	2954921		oplied For ot Applicable	]
Zip Country		Zip	Country		5. Certificate of Status Desired S8.75 Additional Fee Required			
	6. Name and Address of Current Reg	istered Agent		7. Name and Addre	ss of New Registered Ac	gent		1
			Name	معدين يد نيد .				]
	GENEVIEVE		Street Addres	Street Address (P.O. Box Number is Not Acceptable)			1	
	PIONEER TERR	يبلون فالريفهميني ها الميل	i		•		- <del></del>	1
HERNAN	DO FL 34442							
24.4			City		FL	Zip Code	e	1
8 The above	e named entity submits this statement for the	nurgose of changing its	registered office or rogio	stored agent, or both, in the		milior with		┨
the obliga	tions of registered agent.	s purpose or changing its	registered office of regis	stered agent, or both, in the	3 State Of Florida. Talifila	minar with,	апо ассері	
SÏGNATURE				<del></del>				ĺ
24	Signature, typed or printed name of registered agent and to	tle if applicable. (NOTE	: Registered Agent signature requ	rired when reinstating)	DATE			
4.3		2						1
FILE NOW: FEE IS \$61.25			9. Election Campaign Financing Trust Fund Contribution.		Make Check			1
, == *	•	irust Fund C	ontribution.	Added to Fees	Florida Departn	nent of S	State	ļ
10.	OFFICERS AND DIREC	TORS	11,	ADDITIONS/CHANGES	TO OFFICERS AND DIRE	CTORS IN	10	{
TITLE	D	☐ Delete	TITLE	7.000111014070117414020		Change	Addition	19
NAME	STROBECK, EVELYN		NAME		·	onlings	/ louditon	3
STREET ADDRESS	4701 N. APACHE TR		STREET ADDRESS			•		1
CITY-ST-ZIP	HERNANDO FL 34442		CITY-ST-ZIP					18
TITLE	S	☐ Delete	TITLE		[	☐ Change	☐ Addition	] }
NAME	MORSE, YVONNE		NAME					ľ
STREET ADDRESS CITY-ST-ZIP	3525 E.EAGLE TR		STREET ADDRESS					
	HERNANDO FL 34442	···	CITY-ST-ZIP					1
TITLE NAME	ENNIS, GENEVIEVE	☐ Delete	TITLE NAME		]	Change	☐ Addition	
STREET ADDRESS	4463 N PIONEER TERR		STREET ADDRESS					ĺ
CITY-ST-ZIP	HERNANDO FL 34442	•	CITY-ST-ZIP					
TITLE	D	☐ Del <u>e</u> te	TITLE			Change		ł
NAME	SIMPSON, KAY	Uelete	NAME			-1 CHAINE	- L. Audinoii	-
STREET ADDRESS	3505 TEPEE LN		STREET ADDRESS					
CITY-ST-ZIP	HERNANDO FL 34442		CITY-ST-ZIP					
TITLE	D	☐ Delete	. TITLE			Change	Addition	
NAME	CRASPER, ALICE		NAME					
STREET ADDRESS	3313 E BUFFALO LANE		STREET ADDRESS					
CITY-ST-ZIP	HERNANDO FL 34442	<u> </u>	CITY-ST-ZIP					
TITLE	PD PATTON DATE	☐ Delete	TITLE		Γ	Change	☐ Addition	
NAME STREET ADDRESS	STRATTON, DALE		NAME PERFECT ADDRESS					
CITY-ST-ZIP	3501 E.DOER RUN LANE		STREET ADDRESS					ł
OTT - OT - EIF	HERNANDO FL 34442		CITY-ST-ZIP					1

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 of 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.

GNATURE: LATERING! CONTUIT OF PROVIEVE ( ENNIS MANTOS 726-4210