

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 710623

1. Entity Name

SOUTHEAST VOLUSIA KC BUILDING ASSOCIATION INC.

FILED
Apr 06, 2000 8:00 am
Secretary of State

04-06-2000 90005 028 ****61.25

Principal Place of Business

516 SOUTH ORANGE AVENUE
NEW SMYRNA BEACH FL 32168

Mailing Address

516 SOUTH ORANGE AVENUE
NEW SMYRNA BEACH FL 32168-7319

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

93-0820067

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

WOHLUST, LEE H
5303 SOUTH ATLANTIC AVE., #38
NEW SMYRNA BEACH FL 32169-4538

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

Lee H. Wohlust - Lee H. Wohlust

10-Jan-00

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 PD
NAME WOHLUST, LEE H
STREET ADDRESS 5303 SOUTH ATLANTIC AVE., #38
CITY-ST-ZIP NEW SMYRNA FL 32169-4538

☐ Delete

TITLE ~~OFF~~
NAME SKOWRONSKI, JAMES W
STREET ADDRESS 400 SEAGULL COURT
CITY-ST-ZIP EDGEWATER FL 32141

☒ Delete

TITLE D-V-P
NAME ALFRED GRAY
STREET ADDRESS 1715 JUNIPER DR
CITY-ST-ZIP EDGEWATER FL 32132

☐ Delete

TITLE D
NAME GERALD SABATINO
STREET ADDRESS 51 CLUB HOUSE BLVD
CITY-ST-ZIP NEW SMYRNA FL 32168

☐ Delete

TITLE SD
NAME ALAN HUGHES
STREET ADDRESS 3438 YALE RD
CITY-ST-ZIP SOUTH DAYTONA FL 32119

☒ Delete

TITLE D
NAME JAY BLAIE
STREET ADDRESS 3124 PINE TREE DR
CITY-ST-ZIP EDGEWATER FL 32141

☒ Delete

TITLE D-ST
NAME WILLIAM L. Kennedy
STREET ADDRESS 1724 S. Riverside Dr.
CITY-ST-ZIP Edgewater, FL - 32132

☐ Change ☐ Addition

TITLE D
NAME ALBERT J. Chavaree
STREET ADDRESS 827 E. 20th AVE
CITY-ST-ZIP New Smyrna, FL 32169

☒ Change ☒ Addition

TITLE D
NAME JOSEPH DE ANDREA
STREET ADDRESS 724 Green Rd.
CITY-ST-ZIP New Smyrna Bch, FL - 32168

☐ Change ☐ Addition

TITLE D
NAME ALBERT J. Chavaree
STREET ADDRESS 827 E. 20th AVE
CITY-ST-ZIP New Smyrna, FL 32169

☒ Change ☒ Addition

TITLE D
NAME JOSEPH DE ANDREA
STREET ADDRESS 724 Green Rd.
CITY-ST-ZIP New Smyrna Bch, FL - 32168

☒ Change ☒ Addition

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:

Lee H. Wohlust - Lee H. Wohlust

10-Jan-00

404-427-8168

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)