

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

09-05-2003 90111 042 \*\*\*\*61.25  
FILE 1710656

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DOCUMENT # 710656

1. Entity Name

FLORIDA SENIOR GOLF ASSOCIATION, INC.



03 SEP 10 AM 11:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

2907 BAY TO BAY BLVD  
SUITE 102  
TAMPA FL 33629  
US

Mailing Address

PO BOX 10493  
TAMPA FL 33679

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 59-6182034

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARCOTTE, DENNIS R  
2907 BAY TO BAY BLVD  
STE 102  
TAMPA FL 33606

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. I am familiar with, and accept the obligations of registered agent.

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  
After September 10, 2003, min will be \$236.25

9. Election Campaign Financing  
Trust Fund Contribution.

☐ \$5.00 May Be  
Added to Fees

Make Check Payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D  
NAME LOTZ, W. P.  
STREET ADDRESS 2833 LA CONCHA DRIVE  
CITY-ST-ZIP CLEARWATER FL 33762 ☒ Delete

TITLE PD  
NAME STAGG, C LAWRENCE  
STREET ADDRESS 3303 SAN NICHOLAS ST  
CITY-ST-ZIP TAMPA FL 33629 ☐ Delete

TITLE VP  
NAME HEDRICK, CHARLES L  
STREET ADDRESS 6070 51ST ST SOUTH  
CITY-ST-ZIP SAINT PETERSBURG FL 33713 ☐ Delete

TITLE ST  
NAME MARCOTTE, DENNIS R  
STREET ADDRESS 3215 SAN NICHOLAS ST  
CITY-ST-ZIP TAMPA FL 33629 ☐ Delete

TITLE VD  
NAME WALTERS, RALPH  
STREET ADDRESS 14431 EAGLE POINT DR.  
CITY-ST-ZIP CLEARWATER FL 33762 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☐ Addition

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

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

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STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (4/03)