2000 UNIFORM BUSINESS REPORT (UBR)

## Apr 24, 2000 8:00 am Secretary of State **DOCUMENT # 713881** 1. Entity Name TRAILER ESTATES SHUFFLEBOARD CLUB, INC. 02-14-2000 90007 035 \*\*\*\*61.25 Principal Place of Business Mailing Address T.E. BOX 5308 T.E., BOX 5308 6521 ARIZONA 6521 ARIZONA BRADENTON FL 34281 **BRADENTON FL 34281-5308** 2. Principal Place of Business 3. Mailing Address Trailer Estates Shuffle Board F BOX 5308 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 6521 Arizona City & State City & State 4. FEI Number Applied For Bradenton 34281 **NOT APPLICABLE** Bradentun Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent as last tear Street'Address (P.O. Box Number is Not Acceptable) FELL. PHYLLIS 6521 ARIZONA PO BOX 5308 Zip Code **BRADENTON FL 34281** FL 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Pavable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees **Department of State** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE TITLE ☐ Change ☐ Delete Addition NAME FELL, PHYLLIS NAME . 23 STREET ADDRESS 6521 ARIZONA/ PO BOX 5308 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BRADENTON FL 34281 ☐ Delete TITLE ALEXANDER, MARION NAME NAME STREET ADDRESS STREET ADDRESS 1016 NEW YORK/ PO BOX 6201 CITY-ST-ZIP CITY-ST-78 BRADENTON FL 34281 ☐ Delete TITIE Change Addition TITLE NAME NAME Kenyon, Teresa d STREET ADDRESS 807\*NEW-YORK/-PO-BOX 6161-STREET ADDRESS. CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34281** Delete TITLE TITLE ☐ Change Addition MAME WALSH, LILLIAN NAME STREET ADDRESS STREET ADDRESS 6604 KANSAS/PO BOX 6640 CITY-ST-ZIP CITY-ST-ZIP Bradenton FL ☐ Delete TITLE TITLE ☐ Change Addition COWAN, MARY -NAME STREET ADDRESS 1809 M.N.H/P O BOX 6174 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **BRADENTON FL** ☐ Delete TITLE TITLE Change ☐ Addition LANGTON, RUTH NAME NAME STREET ADDRESS STREET ADDRESS 2107 CHIC/P O BOX 6174 CITY-ST-ZIP **BRADENTON FL 34281** 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 attackment with an address, with all other like empowered. SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE: SIGNATURE: