

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 14, 2000 8:00 am
Secretary of State

02-14-2000 90013 020 ****61.25

DOCUMENT # 714907

1. Entity Name

BIG PINE KEY CIVIC ASSOCIATION, INC.

Principal Place of Business

Mailing Address

U.S. HWY 1
BIG PINE KEY FL 33043-0190
US

P.O. BOX 430190
BIG PINE KEY FL 33043-0190
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2079108

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SCHNEIDER, ROBERT
3841 DONNA RD
BIG PINE KEY FL 33043

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 ☐ Delete
NAME **P**
STREET ADDRESS **SCHNEIDER, ROBERT E**
CITY-ST-ZIP **3841 DONNA ROAD**
BIG PINE KEY FL 33043-6111

TITLE ☐ Delete
NAME **VP**
STREET ADDRESS **SHINKEVICH, EUGENE**
CITY-ST-ZIP **1206 WESTSHORE DRIVE**
BIG PINE KEY FL 33043

TITLE ☐ Delete
NAME **VD**
STREET ADDRESS **POKORSKI, VERN**
CITY-ST-ZIP **760 BIG PINE AVENUE**
BIG PINE KEY FL 33043

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **DAY, PATI**
CITY-ST-ZIP **29044 BEGONIA DRIVE**
BIG PINE KEY FL 33043-6017

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **KUHN, TONY**
CITY-ST-ZIP **29423 SARATPGA AVENUE**
BIG PINE KEY FL 33043-3208

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **LEM, WARREN**
CITY-ST-ZIP **29544 CONSTITUTION AVENUE**
BIG PINE KEY FL 33043-9706

TITLE ☐ Change ☒ Addition
NAME **S**
STREET ADDRESS **Bolton, Joan**
CITY-ST-ZIP **3848 DONNA ROAD**
Big Pine Key, FL 33043

TITLE ☐ Change ☒ Addition
NAME **S**
STREET ADDRESS **CLOSSER, DAYTON**
CITY-ST-ZIP **29311 Oleander Drive**
BIG PINE KEY, FL 33043

TITLE ☐ Change ☒ Addition
NAME **T**
STREET ADDRESS **SCHNEIDER, BRENDA**
CITY-ST-ZIP **3841 Donna Road**
Big Pine Key, FL 33043

TITLE ☐ Change ☒ Addition
NAME **D**
STREET ADDRESS **MENG, NORINE**
CITY-ST-ZIP **29013 MARIGOLD DRIVE**
BIG PINE KEY, 33043

TITLE ☐ Change ☒ Addition
NAME **D**
STREET ADDRESS **SWEET, CHARLES**
CITY-ST-ZIP **30240 WATSON BLVD.**
BIG PINE KEY, 33043

TITLE ☐ Change ☒ Addition
NAME **D**
STREET ADDRESS **WILLIAMS, LEIGH**
CITY-ST-ZIP **2072 PALM BEACH ROAD**
BIG PINE KEY, 33043

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: **ROBERT E. SCHNEIDER** *Robert E. Schneider* 2-5-2000 305-8723509
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #