2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2001 8:00 am
Secretary of State
05-14-2001 90071 013 ****61.25

DOCUMENT # 716185

1. Entity Name

SEMINOLE POST NUMBER ONE HUNDRED ELEVEN (111) IN

Principal Place of Business	Mailing Address
6918 FLORIDA AVENUE TAMPA FL 33604	6918 FLORIDA AVENUE TAMPA FL 33604

DO NOT WRITE IN THIS SPACE

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 59-0911046 ☐ 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
MILLER SR, THOMAS A. 1105 W IDLEWILD AVE TAMPA FL 33604	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	CD STRYKOSKIE, S.J. 8504 N. NEWPORT AV. TAMPA FL 33604	XX ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD Allen S. Holley 6906 N. Willow Av. Tampa, FL 33604	XX ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HOLLEY, ALLEN S 6906 N. WILLOW ST. TAMPA FL 33604	XX ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Fred Belcher 45419 Northshore Villa St #39 Tampa, FL 33604	XX ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HATHAWAY, ROBERT 7608 N. BOULEVARD TAMPA FL 33604	XX ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD J. G. Taylor, Jr. 16113 Armistead Ln. Odessa, FL 33556	XX ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HATHAWAY, ROBERT 7608 N. BOULEVARD TAMPA FL 33604	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD J. G. Taylor, Jr. 16113 Armistead Ln. Odessa, FL 33556	XX ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLAYTON, BROWN D JR 19098 W. FERN ST. TAMPA FL 33634	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: J. G. Taylor, JR. J. G. TAYLOR JR. 4-30-01 813-236-2281
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #