2002 UNIFORM BUSINESS REPORT (UBR)

Jan 21, 2002 8:00 am **DOCUMENT # 717184** Secretary of State 1. Entity Name SUNSHINE CITY CHAPTER NO. 9. INCORPORATED 01-21-2002 90038 010 ****61.25 Principal Place of Business Mailing Address 4801 37TH ST. N 4801 37TH ST. N SAINT PETERSBURG, FL 33714. SAINT PETERSBURG FL 33714 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-6196567 Not Applicable Zip 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 Street Address (P.O. Box Number is Not Acceptable) BRANESKY, PAUL 4801 37TH ST N ST PETERSBURG FL 33714 City 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. Make Check Payable to 9." Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 П Trust Fund Contribution. **Department of State** Added to Fees Ş, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. (9/01) ☐ Addition TITLE ☐ Delete TITLE **BRANESKY, PAUL** NAME NAME STREET ADDRESS 4801 37 ST N STREET ADDRESS ST PETERSBURG FL 33714 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE KING, LARRY NAME NAME 4801 37TH STREET NORTH STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33714 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE GOLDEN, JOHN NAME NAME 4801 37TH ST. N. STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33714 CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change KING, LARRY NAME NAME 4801 37TH ST N STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33714 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE ANDREWS, JIM NAME 4801 37TH ST N STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33714 CITY-ST-ZIP CITY-ST-ZIP. ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS 12. I hereby certify that the information supplied with this filling 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 i changed, or on an attachment with an address, with all other like empowered.

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FILED