

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 717295

1. Entity Name

GERMAN AMERICAN SOCIETY OF DAYTONA BEACH, INC.

FILED

Mar 06, 2002 8:00 am
Secretary of State

03-06-2002 90059 036 ****61.25

Principal Place of Business

Mailing Address

3 RIVER ROCK TRAIL

P.O. BOX 5194

ORMOND BCH FL 32174-3984

ORMOND BCH FL 32174-3984

23 Seafaring Poth
Palm Coast FL 32164

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

59-1274044

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

~~BINDER, JOSEPH~~

~~3 RIVER ROCK TRAIL~~

~~ORMOND BEACH FL 32174~~

Schlieper, Reinhold
23 Seafaring Poth
Palm Coast, FL 32164

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

T ☐ Delete
NAME HANNELORE, SIEBER
STREET ADDRESS ONE OCEAN WEST BLD # 18 B2
CITY-ST-ZIP DAYTONA BEACH FL 32118

S ☐ Delete
NAME ANDERSON, RITA
STREET ADDRESS 5761 WHITE ACRES LA
CITY-ST-ZIP PORT ORANGE FL 32127

P ☒ Delete
NAME BINDER, JOSEPH
STREET ADDRESS 3 RIVER ROCK TRAIL
CITY-ST-ZIP ORMOND BCH FL

D ☐ Delete
NAME ZIMMERMANN, DIETER
STREET ADDRESS 35 TIM BERLAKE LA
CITY-ST-ZIP ORMOND BEACH FL 32174

D ☐ Delete
NAME ERNA
STREET ADDRESS 500 REVILLO BL
CITY-ST-ZIP DAYTONA BEACH FL 32118

* President ☐ Delete
NAME SCHLIEPER, REINHOLD
STREET ADDRESS 8 REDMAPLE CL
CITY-ST-ZIP ORMOND BEACH FL 32174

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

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

D ☒ Change ☐ Addition
NAME Joseph Binder
STREET ADDRESS 3 River Rock Trail
CITY-ST-ZIP Ormond Beach, FL 32174

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

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

VVP ☒ Change ☐ Addition
NAME MARKOVICS, MELBA
STREET ADDRESS 19 Ridge Trail
CITY-ST-ZIP Ormond Beach FL 32174

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(b), 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

Feb 13, 2002 (386) 761-7280
Date Daytime Phone

CR2E037 (9/01)