

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 718545

1. Entity Name

BOYS AND GIRLS CLUBS OF THE SUNCOAST, INC. ✓

FILED
Aug 01, 2000 8:00 am
Secretary of State

08-01-2000 90089 001 *****8.75

08-01-2000 90089 002 *****61.25

Principal Place of Business

Mailing Address

5111 66TH STREET, NORTH
SUITE 200
ST. PETERSBURG FL 33709
US

5111 66TH STREET, NORTH
SUITE 200
ST. PETERSBURG FL 33709-3141
US

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

59-1566799

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PERRI, NELSON
5111 66TH STREET, NORTH
SUITE 200
ST. PETERSBURG FL 33709

Name Carl R. Lavender Jr.

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 TD ☒ Delete
NAME FINE, W. EDWARD
STREET ADDRESS 4824 SECOND AVENUE, SOUTH
CITY-ST-ZIP ST. PETERSBURG FL 33711

TITLE TD ☒ Change ☐ Addition
NAME Joseph A Lupacchino
STREET ADDRESS 9275 Park Blvd.
CITY-ST-ZIP Seminole, FL 33777

TITLE VD ☐ Delete
NAME COATS, JAMES F.
STREET ADDRESS 10750 ULMERTON RD
CITY-ST-ZIP LARGO FL

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

TITLE VD ☐ Delete
NAME ZUROWSKI, TERRY L.
STREET ADDRESS 7901 66TH STREET, NORTH
CITY-ST-ZIP PINELLAS PARK FL 33781

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

TITLE VD ☐ Delete
NAME GUARINO, JOHN
STREET ADDRESS 424 CENTRAL AVENUE, STE 1000
CITY-ST-ZIP ST PETERSBURG FL

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

TITLE SD ☒ Delete
NAME GALLOWAY, BARBARA
STREET ADDRESS 880 CARILLON PARKWAY
CITY-ST-ZIP ST PETERSBURG FL 33713

TITLE SD ☒ Change ☐ Addition
NAME Hugh Ann Cason-Kelly
STREET ADDRESS 240 Sand Key Estates Drive #81
CITY-ST-ZIP Clearwater, FL 33767

TITLE PD ☐ Delete
NAME RICARDO, RONALD M
STREET ADDRESS 1401 COURT STREET
CITY-ST-ZIP CLEARWATER FL 33756

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

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #