

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 719523

1. Entity Name

TALLAHASSEE CLUB OF FRONTIERS INTERNATIONAL, INC

**FILED**  
**Mar 31, 2000 8:00 am**  
**Secretary of State**

03-31-2000 90063 042 \*\*\*\*61.25

Principal Place of Business

2414 MEXIA AVE  
TALLAHASSEE FL 32304  
US

Mailing Address

P.O. BOX 5445  
TALLAHASSEE FL 32314-5445  
US

2. Principal Place of Business

533 Tuskegee St.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Tallahassee, FL

City & State

Zip

32310

Country

U.S.A.

Country

4. FEI Number

59-6526115

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

STUCEKS, SR A D  
2414 MEXIA AVE  
TALLAHASSEE FL 32304

7. Name and Address of New Registered Agent

Name Curtis Richardson

Street Address (P.O. Box Number is Not Acceptable)  
533 Tuskegee street

City Tallahassee

FL

Zip Code

32310

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

*Curtis Richardson*

President

3/13/00

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	STUCKS, JR A D	
STREET ADDRESS	2414 MEXIA AVE	
CITY-ST-ZIP	TALL FL 32304	
TITLE	VD	<input type="checkbox"/> Delete
NAME	RICHARDSON, C	
STREET ADDRESS	533 TUSKEGEE ST	
CITY-ST-ZIP	TALL FL 32310	
TITLE	SD	<input type="checkbox"/> Delete
NAME	WESTER, LEROY	
STREET ADDRESS	1502 COLEMAN STREET	
CITY-ST-ZIP	TALLAHASSEE FL 32310	
TITLE	TD	<input type="checkbox"/> Delete
NAME	CYRUS, CHARLES	
STREET ADDRESS	501 BLAIRSTONE RD #4004	
CITY-ST-ZIP	TALLAHASSEE FL 32301	
TITLE	ATD	<input type="checkbox"/> Delete
NAME	HAMILTON, JOHN	
STREET ADDRESS	2750 OLD ST AUGUSTINE RD, R-179	
CITY-ST-ZIP	TALLAHASSEE FL 32312	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Curtis Richardson	
STREET ADDRESS	533 Tuskegee street	
CITY-ST-ZIP	Tallahassee, FL 32310	
TITLE	Vice-President VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Charles Cyrus	
STREET ADDRESS	501 BlaiSTONE Road	
CITY-ST-ZIP	Tallahassee, FL 32301	
TITLE	Secretary SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	John Hamilton	
STREET ADDRESS	3448 Gentle Winds Way	
CITY-ST-ZIP	Tallahassee, FL 32311	
TITLE	Assistant Secretary ASD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Leroy wester	
STREET ADDRESS	1502 coleman street	
CITY-ST-ZIP	Tallahassee, FL 32310	
TITLE	Treasurer TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jerry Lewis	
STREET ADDRESS	2001 Free Court	
CITY-ST-ZIP	Tallahassee, FL 32301	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

*Curtis Richardson*

3/13/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #