

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 720288

1. Entity Name

MERRITT ISLAND CHAPTER #756 OF AMERICAN ASSOCIAT

FILED
Apr 23, 2000 8:00 am
Secretary of State

04-23-2000 90061 025 ****61.25

Principal Place of Business

Mailing Address

200 S. SYKES CREEK PKY
#104
MERRITT ISLAND, FL 32952
US

200 S. SYKES CREEK PKY
#104
MERRITT ISLAND, FL 32952-3561
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-7097944

Applied For

Not Applicable

Zip

Country

Zip

Country

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

HARDOS, JOHN
1355 CEPHEUS CT.
MERRITT ISLAND FL 32953

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 P ☐ Delete
NAME O'GEEN, CHARLES
STREET ADDRESS 200 S SYKES CREEK PKWY #104
CITY-ST-ZIP MERRITT ISLAND FL 32952

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

TITLE S ☐ Delete
NAME O'GEEN, SHIRLEY
STREET ADDRESS 200 S. SYKES CREEK PKWY #104
CITY-ST-ZIP MERRITT ISLAND FL 32952

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

TITLE T ☐ Delete
NAME HARDOS, JOHN
STREET ADDRESS 1355 CEHEUS CT
CITY-ST-ZIP MERRITT ISLAND FL 32953

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

TITLE D ☒ Delete
NAME GAULIN, JANET
STREET ADDRESS 375 NEEDLE BLVD.
CITY-ST-ZIP MERRITT ISLAND FL 32953

TITLE D ☒ Change ☐ Addition
NAME SCHON, MARY ANN
STREET ADDRESS 1295 PLUM AVE.
CITY-ST-ZIP MERRITT ISLAND, FL. 32952

TITLE VP ☒ Delete
NAME SHAFFER, JEANNE M
STREET ADDRESS 1288 LENORA DR.
CITY-ST-ZIP MERRITT ISLAND FL 32953

TITLE VP ☒ Change ☐ Addition
NAME REGAR, ALLENE W.
STREET ADDRESS 4872 LAKE SUPERIOR DR.
CITY-ST-ZIP COCOA, FL 32926

TITLE D ☒ Delete
NAME KRANICK, PHYLLIS
STREET ADDRESS 11 HEPBURN PL
CITY-ST-ZIP MERRITT ISLAND FL 32953

TITLE D ☒ Change ☐ Addition
NAME NEVITT, GEORGETTE
STREET ADDRESS 4020 COTTONWOOD CIR.
CITY-ST-ZIP COCOA, FL. 32926

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:

CHARLEY O GEEN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLEY O GEEN

4/13/2000 (321)452-6300

Date

Daytime Phone #

CR2E037 (9/99)