

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 723862

1. Entity Name

CIVITAN CLUB OF SOUTHBORO, FLORIDA, INC

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90023 002 ****61.25

Principal Place of Business 3200 SUMMIT BLVD P O BOX 18892 WEST PALM BEACH FL 33416-5892	Mailing Address 3200 SUMMIT BLVD P O BOX 18892 WEST PALM BEACH FL 33416-8892
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1412347	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HOUGHTALING, JUNE 4584 24TH PLACE SOUTH WEST PALM BEACH FL 33415	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 <i>June Houghtaling</i> Signature, typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent signature required when reinstating)	DATE 4/28/00
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FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																								
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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: <i>June Houghtaling</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE 4/28/00	DAYTIME PHONE # 561-963-8501
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CR2E037 (9/99)