

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 725621

1. Entity Name

TREASURE COAST BOATING SAFETY ASSOCIATION, INC.

Principal Place of Business

1400 SEAWAY DR
FORT PIERCE FL 34949

Mailing Address

1400 SEAWAY DR
FORT PIERCE FL 34949-3152

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

59-2367649

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

HENDERSON, JERALD D
5009 BUCHANAN DR
FORT PIERCE FL 34982

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

Jerald D. Henderson, JERALD D. HENDERSON, PD

2-10-00

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 PD
NAME HENDERSON, JERALD D
STREET ADDRESS 5009 BUCHANAN DR
CITY-ST-ZIP FORT PIERCE FL 34982 ☐ Delete

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

TITLE VD
NAME CAWTHORNE, J DALE
STREET ADDRESS 4176B GATOR TRACE, VILLAS COURT
CITY-ST-ZIP FORT-PIERCE-FL 34982 ☐ Delete

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

TITLE TD
NAME HENDERSON, JANE R
STREET ADDRESS 5009 BUCHANAN DR
CITY-ST-ZIP FT PIERCE FL 34982 ☐ Delete

TITLE TD
NAME ALFRED J. LOWRY
STREET ADDRESS 6516 ZAPOTE CT
CITY-ST-ZIP FORT PIERCE, FL 34951 ☒ Change ☐ Addition

TITLE D
NAME BENEDICT, THERESA H
STREET ADDRESS 7005 SALERNO RD
CITY-ST-ZIP FT PIERCE FL 34951 ☐ Delete

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

TITLE D
NAME MCMAHON, WILLIAM J
STREET ADDRESS 2496 HARBOUR COVE DR
CITY-ST-ZIP FORT PIERCE FL 34949 ☐ Delete

TITLE D
NAME JAMES G. ADAMS
STREET ADDRESS 2217 SE LEITHGOW ST
CITY-ST-ZIP PORT ST LUCIE, FL 34952 ☒ Change ☐ Addition

TITLE D
NAME FLIEGEL, HENRY H
STREET ADDRESS 5300 DEER RUN DRIVE
CITY-ST-ZIP FORT PIERCE FL 34951 ☐ Delete

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

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:

Jerald D. Henderson, JERALD D. HENDERSON, PD 2-10-00 (561) 466-8591

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)