

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 725688

1. Entity Name

FLOTILLA 44, INCORPORATED

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

03-01-2000 90065 047 ****61.25

Principal Place of Business

Mailing Address

401 S. BEACH ST
U.S.C.G. AUXILIARY BLDG.
DAYTONA BEACH FL 32114
US

C/O W.J. HALL
P O BOX 261
ORMOND BCH FL 32175-0261

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

23-7346875

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

HALL, W. JAMES
20 TOMOKA AVE
ORMOND BCH FL 32174

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 C ☐ Delete
NAME TESTON, KARIN L
STREET ADDRESS PO BOX 291031 N/A
CITY-ST-ZIP PT ORANGE FL 32129

TITLE P ☒ Change ☐ Addition
NAME SERDAR, SANDRA R.
STREET ADDRESS 586 S. RIDGEWOOD AVE.
CITY-ST-ZIP ORMOND BEACH, FL. 32174

TITLE VP ☒ Delete
NAME SERDAR, SANDRA R
STREET ADDRESS 586 S RIDGEWOOD AVENUE
CITY-ST-ZIP ORMOND BEACH FL 32174

TITLE T ☐ Change ☐ Addition
NAME W. JAMES HALL
STREET ADDRESS 20 TOMOKA AVE.
CITY-ST-ZIP ORMOND BEACH, FL. 32174

TITLE P ☒ Delete
NAME JACOBSEN, CHARLES H
STREET ADDRESS 44 OAKMONT CIRCLE
CITY-ST-ZIP ORMOND BCH FL 32174-3817

TITLE S ☐ Change ☐ Addition
NAME MCCLELLAN, VIVIAN S.
STREET ADDRESS 935 N. HALIFAX AVE.
CITY-ST-ZIP DAYTONA BEACH, FL. 32118-3755

TITLE D ☐ Delete
NAME BAUM, GERALD E
STREET ADDRESS 1244 S. PENINSULA DR., #116
CITY-ST-ZIP DAYTONA BEACH FL 32118

TITLE D ☐ Change ☐ Addition
NAME SCHAUFERT, RICHARD F.
STREET ADDRESS 17 PROMONADE AT LIONS PAW
CITY-ST-ZIP DAYTONA BEACH, FL. 32124-1500

TITLE D ☐ Delete
NAME BENSON, WILLIAM J
STREET ADDRESS PO BOX 291579 N/A
CITY-ST-ZIP PT ORANGE FL 32129

TITLE V.P. ☐ Change ☒ Addition
NAME ROBINSON, NANCY F.
STREET ADDRESS 134 BELLEVILLE AVE.
CITY-ST-ZIP S.O. DAYTONA, FL. 32118

TITLE D ☐ Delete
NAME HODEL, WILLIAM T
STREET ADDRESS 2283 S PALMETTO ST
CITY-ST-ZIP S DAYTONA FL 32119-3007

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:

W. JAMES HALL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

23 Feb 2000 904-672-4512

CR2E037 (9/99)