2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2001 8:00 am
Secretary of State
02-07-2001 90154 025 ****61.25

DOCUMENT # 725995

1. Entity Name

PORT RICHEY - HUDSON CHATER #1357 OF AMERICAN AS

Principal Place of Business	Mailing Address
~~7000 VENICE DR.~~ 13815 Celida Avenue ~~PORT RICHEY FL 34668~~ 34667 Hudson, Fl.	~~7000 VENICE DR.~~ 13815 Celida Ave. ~~PORT RICHEY FL 34668~~ Hudson FL 34667

DO NOT WRITE IN THIS SPACE

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 23-7265395 ☐ 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
~~HAMMOND, MERROLL C~~ Helen Barnes ~~7000 VENICE DR.~~ 13815 Celida Avenue ~~PORT RICHEY FL 34668~~ Hudson, FL 34667	Name: Helen Barnes Street Address (P.O. Box Number is Not Acceptable): 13815 Celida Ave. City: Hudson, FL Zip Code: 34667

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 HELEN BARNES 1/29/01
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HAMMOND, MERROLL C 7800 VENICE DR. PORT RICHEY FL 34668	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Helen Barnes 13815 Celida Ave. Hudson, FL 34667	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MORGANSTERN, CLARA 8253 HIXTON DR. PORT RICHEY FL 34668	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Rita Holloway 7116 Boxelder Drive Port Richey, FL 34668	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HAMMOND, LORETTA 7800 VENICE DRIVE PORT RICHEY FL 34667	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Esther Woodworth (WECKWERTH) 11324 Leisure Lane Port Richey, FL 34668	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD RECH, LOUISETTE 16130 FROST DRIVE HUDSON FL 34667-4157	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	L TORNOW, FRED 9204 BROOKER DRIVE NEW PORT RICHEY FL 34655	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: Louisette Rech TREASURER 1/29/01 (727)869-8153
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #