2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Mar 07, 2002 8:00 am Secretary of State **DOCUMENT # 727638** 1. Entity Name 03-07-2002 90030 048 ****61.25 ROADRUNNERS SQUARE DANCE CLUB OF THE PALM BEACHE Principal Place of Business Mailing Address 1811 MONTAGUE STREET 1811 MONTAGUE STREET LAKE WORTH FL 33461-6020 LAKE WORTH FL 33461-6020 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 23-7354113 Not Applicable Country \$8.75 Additional Zip Country Zip П 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HUBBARD, KIPP 1811 MONTAGUE STREET LAKE WORTH FL 33461 Zip Code City Fl 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. (NOTF: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Department of State Trust Fund Contribution: Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME HUBBARD, KIPP NAME STREET ADDRESS STREET ADDRESS **1811 MONTAGUE STREET** CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33461 XX Change ☐ Addition ☐ Delete TITLE TITLE NAME MCTEAUGHLIN, MIKE Wakeman, George STREET ADDRESS 515 S.W. 18TH STREET STREET ADDRESS 724 SOUTH LAKE DRIVE _CITY-ST-ZIP_ CITY:-ST-ZIP -BOYNTON-BEACH,-FL-33<u>426-</u> LANTANA FL 33462 - 15 XX Change ■ Addition ☐ Delete TITLE TITLE NAME NAME GOUGEON, KEN WAKEMAN, GEORGE STREET ADDRESS 724 SOUTH LAKE DRIVE STREET ADDRESS 2330 LANTANA RD LOT 4B CITY-ST-ZIP LANTANA, FL 33462 CITY-ST-ZIP LANTANA FL 33462 Addition ☐ Change ☐ Delete TITLE TITLE GORDON ESKRIDGE NAME NAME STREET ADDRESS STREET ADDRESS 629 WEST OCEAN AVE CITY-ST-ZIP CITY-ST-ZIP **BOYHTON BEACH FL 33426** ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITI F TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. I hereby certify that the information supplied with this filling 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.

FILED

561-586-3095