

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 729285

1. Entity Name

CLEARWATER GULF COAST CHAPTER #1708 OF AMERICAN A

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90109 010 ****61.25

Principal Place of Business

Mailing Address

THE HAMPTON AT CLEARWATER
1099
CLEARWATER FL 33759
US

1099 MC MULLEN BOOTH RD
APT 107
CLEARWATER FL 33759-3461
US

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

23-7356150

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

MOREHOUSE, MARION R
1099 MC MULLEN BOOTH RD
APT 107
CLEARWATER FL 33759

Name

GROSCUP, Jean

Street Address (P.O. Box Number is Not Acceptable)

2675 Resnik Cr. W

City

Palm Harbor

FL

Zip Code

34682

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

Jean Groscup

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/4/00

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 P
NAME MOREHOUSE, MARION R
STREET ADDRESS 1099 MCMULLEN BOOTH RD APT 107
CITY-ST-ZIP CLEARWATER FL 33759 ☒ Delete

TITLE P
NAME GROSCUP, Jean
STREET ADDRESS 2675 Resnik Cr. W
CITY-ST-ZIP Palm Harbor, FL 34682 ☐ Change ☒ Addition

TITLE CD
NAME PRESTON, DORIS
STREET ADDRESS 1099 MCMULLEN BOOTH RD #412
CITY-ST-ZIP CLEARWATER FL 33759 ☒ Delete

TITLE VP
NAME MEANS, Karl
STREET ADDRESS 1275 Tahoe Drive
CITY-ST-ZIP Clearwater, FL 33764 ☐ Change ☒ Addition

TITLE TD
NAME ZEILENGER, BERNICE
STREET ADDRESS 1099 MCMULLEN BOOTH RD APT 803
CITY-ST-ZIP CLEARWATER FL 33759 ☒ Delete

TITLE T
NAME ZEILENGER, BERNICE
STREET ADDRESS 1099 MCMULLEN BOOTH RD #803
CITY-ST-ZIP Clearwater, FL 33759 ☒ Change ☐ Addition

TITLE SD
NAME SHERBURN, MARGARET
STREET ADDRESS 1099 MCMULLEN BOOTH RD APT 614
CITY-ST-ZIP CLEARWATER FL 33759 ☐ Delete

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

TITLE CD
NAME JEAN HORAN
STREET ADDRESS 1099 MCMULLEN BOOTH RD APT 421
CITY-ST-ZIP CLEARWATER FL ☐ 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

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/00

727/734-4430

Date

Daytime Phone #

CR2E037 (9/99)