## 2000 UNIFORM BUSINESS REPORT (UBR)

MUDIUM

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

SIGNATURE:

## FILED DOCUMENT # **732573** Apr 10, 2000 8:00 am Secretary of State COMMUNITY THRIFT SHOP, INC. 04-10-2000 90031 010 \*\*\*\*61.25 Principal Place of Business Mailing Address 420 41 ST. ST. W. 420 41ST, ST, W. **BRADENTON FL 34209-2944 BRADENTON FL 34209** DOODILOT 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 23-7439471 Not Applicable Country \$8.75 Additional Zip Country 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) BLALOCK, ROBERT G. 1101 8TH AVENUE WEST BRADENTON FL Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Pavable to FILE NOW: **\$5.00** May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. (66/6)**△**Addition ☐ Change TITLE ☐ Delete TITLE ABNEY DARLENE NAME HAYES, LINDA NAME 254 ROBIN DR. STREET ADDRESS STREET ADDRESS 2403 LANDINGS CIR 34236 SARASOTA, FL CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** Addition TITLE ☐ Delete Change MARY EUEN MOTYL NAME KITZ, LINDA NAME 4763 TRAVINI CR. # 103 STREET ADDRESS 1407 RIVERVIEW CIRCLE STREET ADDRESS SARASOTA FL 34235 CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** Addition VΡ TITLE ☐ Change ☐ Delete TITLE FERGESON, ROBYN 7638 ALBERT TILLINGHAST DR. NAME NAME MANCINI, J STREET ADDRESS STREET ADDRESS 1600 1ST AVE NW 34240 SARASOTA FI CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34205** TITLE Change Addition ☐ Delete DITHE MODOY CITERYL 410 31ST ST.W NAME KALLENBACH, KATHY NAME STREET ADDRESS STREET ADDRESS 3405 62ND ST E CITY-ST-ZIP BRADENTON FL 34205 CITY-ST-ZIP BRADENTON FL ☐ Change Addition TITLE TITLE □ Delete MIRE, BARBARA PISTONE, FRANKIE NAME NAME STREET ADDRESS 4125195 STW STREET ADDRESS 308 SPRING LAKES BLVD 34209 CITY-ST-71P CITY-ST-ZIP **BRADENTON FL** BLADENTON ☐ Change TITLE □ Delete TITLE NAME HOAGLAND, MARY NAME STREET ADDRESS STREET ADDRESS 801 26 AVE W CITY-ST-ZIP CITY-ST-ZIP PALMETTO FL 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.