

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90096 027 ****61.25

0042236

DOCUMENT # 736847

1. Entity Name

SERTOMA CLUB OF ST. PETERSBURG, INC.

Principal Place of Business

Mailing Address

73 38TH AVE N
 ST. PETERSBURG FL 33710

5503 38TH AVE N
 ST. PETERSBURG FL 33710
 US

80047375



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

5111 66TH ST

14031 EGRET LN

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 102

City & State

City & State

ST PETERSBURG FL

CLERMONT FL

Zip

Country

Zip

Country

33709

Pinellas

33762

Pinellas

4. FEI Number

59-2858970

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

WHARRIE, ROBERT E ESQ
 5503 38TH AVE N
 ST. PETERSBURG FL 33710

Name
 BRYAN L. ALBERS ESQ

Street Address (P.O. Box Number is Not Acceptable)
 5111 66TH ST Suite 102

City
 ST PETERSBURG

FL

Zip Code

33709

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 ☐ Delete
 NAME DUSSEAU, NORMAN
 STREET ADDRESS 1 BEACH DRIVE # 2005
 CITY-ST-ZIP SAINT PETERSBURG FL 33701

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

TITLE ☐ Delete
 NAME SHINGLER, ROBERT
 STREET ADDRESS 2400 FEATHER SOUND DR. #612
 CITY-ST-ZIP CLEARWATER FL 33762

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 14810 RUE de BAYONNE E-6
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME MALATINO, LONNIE V
 STREET ADDRESS 6073 16TH LANE N.E.
 CITY-ST-ZIP ST PETERSBURG FL 33073

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

TITLE ☒ Delete
 NAME BRYAN, ALBERS
 STREET ADDRESS 10333 -98TH ST N
 CITY-ST-ZIP LARGO FL 33773

TITLE ☐ Change ☒ Addition
 NAME TROHUB, Dick
 STREET ADDRESS 6060 126TH AVE N.
 CITY-ST-ZIP LARGO FL 33773

TITLE ☐ Delete
 NAME IERNA, RANDY
 STREET ADDRESS 181 3RD STREET WEST
 CITY-ST-ZIP SAINT PETERSBURG FL 33715

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

TITLE ☒ Delete
 NAME GIBBONS, FRANK
 STREET ADDRESS 2609 RIDGE LN
 CITY-ST-ZIP PALM HARBOR FL 34684

TITLE ☐ Change ☒ Addition
 NAME Dulhagen, John
 STREET ADDRESS 11787 SAREE COURT
 CITY-ST-ZIP LARGO FL 33778

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3105
 727-299-3205

CR2E037 (9/01)