2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #   737138

1. Entity Name
CITRUS PARK BILLS' BOOSTER CLUB, INC.

FILED
Apr 10, 2001 08:00 AM
Secretary of State

Principal Place of Business	Mailing Address
10311 LAKE GROVE DRIVE	10311 LAKE GROVE DRIVE
ODESSA FL	ODESSA FL
33556 US	33556 US

2. Principal Place of Business
13811 PATHFINDER DRIVE
Suite, Apt. #, etc.

3. Mailing Address
13811 PATHFINDER DRIVE
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State	City & State	4. FEI Number	Applied For
TAMPA FL	TAMPA FL		X Not Applicable

Zip	Country	Zip	Country	5. Certificate of Status Desired [X]	**$8.75** Additional Fee Required
33624	US	33624	US		

6. Name and Address of Current Registered Agent

ARNTSON   MARTHA
10311 LAKE GROVE DRIVE

ODESSA   FL
33556   US

7. Name and Address of New Registered Agent

Name
CHESNUT   ARTHUR

Street Address (P.O. Box Number is Not Acceptable)
13811 PATHFINDER DRIVE

City		Zip Code
TAMPA	FL	33624

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 **ARTHUR CHESNUT**   **04/10/2001**
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	TITLE	ASD	☐ Change	[X] Addition
NAME			NAME	ROGERS DANIEL		
STREET ADDRESS			STREET ADDRESS	14810 TULIP DRIVE		
CITY-ST-ZIP			CITY-ST-ZIP	TAMPA FL 33613		
TITLE		☐ Delete	TITLE	RG	☐ Change	[X] Addition
NAME			NAME	BLUM JEFFREY		
STREET ADDRESS			STREET ADDRESS	11042 STREAMSIDE DRIVE		
CITY-ST-ZIP			CITY-ST-ZIP	TAMPA FL 33624		
TITLE	TD	☐ Delete	TITLE	SY	[X] Change	☐ Addition
NAME	CHATTERTON CAMMIE		NAME	JENNINGS WENDY		
STREET ADDRESS	4047 PRIORY CIRCLE		STREET ADDRESS	6224 FROST DRIVE		
CITY-ST-ZIP	TAMPA FL 33624		CITY-ST-ZIP	TAMPA FL 33625		
TITLE	SD	☐ Delete	TITLE	VP	[X] Change	☐ Addition
NAME	AHLES DENISE		NAME	AHLES DENISE		
STREET ADDRESS	1445 HOUNDS HOLLOW CT		STREET ADDRESS	1445 HOUNDS HOLLOW CT		
CITY-ST-ZIP	LUTZ FL 33549		CITY-ST-ZIP	LUTZ FL 33549		
TITLE	ADD	☐ Delete	TITLE	ADD	[X] Change	☐ Addition
NAME	MCCLAIN TIM		NAME	MCCLAIN TIM		
STREET ADDRESS	8921 PROMISE DRIVE		STREET ADDRESS	6110 COGNAC CIRCLE		
CITY-ST-ZIP	TAMPA FL 33626		CITY-ST-ZIP	LUTZ FL 33549		
TITLE	PD	☐ Delete	TITLE	TR	[X] Change	☐ Addition
NAME	ARNTSON MARTHA		NAME	CHESNUT ARTHUR		
STREET ADDRESS	10311 LAKE GROVE DRIVE		STREET ADDRESS	13811 PATHFINDER DRIVE		
CITY-ST-ZIP	ODESSA FL 33556		CITY-ST-ZIP	TAMPA FL 33624		

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: Arthur Chesnut   TR   04/10/2001

CR2E037 (11/00)