

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2001 8:00 am
Secretary of State

03-13-2001 90075 010 ****61.25

DOCUMENT # 742019

1. Entity Name

NEW SMYRNA BEACH-EDGEWATER CHAPTER #3037 OF AMER

Principal Place of Business

Mailing Address

P.O. BOX NO. 1871
 NEW SMYRNA BEACH FL 32170

P.O. BOX NO. 1871
 NEW SMYRNA BEACH FL 32170

729641



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

95-3208632

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SINICKI, ANTHONY
3122 ROYAL PALM DRIVE
EDGEWATER FL 32141

Name

-FERGUSON, WILLIAM

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

1508 VIRGINIA AVE, 111A

City

DAYTONA BEACH

FL

Zip Code

32114

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 **WILLIAM R. FERGUSON, PRESIDENT**

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

(NOTE: Registered Agent signature required when reinstating)

3/5/01

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 NAME STREET ADDRESS CITY-ST-ZIP	P BALLWAGE, FRANK 2217 YULE TREE DR EDGEWATER FL 32141	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SINICKI, NANCY 3122 ROYAL PALM DR EDGEWATER FL 32141-6112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BECKER, ETHEL 73 AQUA CT. NEW SMYRNA BEACH FL 32168	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD O'ROURKE, RUTH 132 E. CONNECTICUT AVE EDGEWATER FL 32132	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THORPE, WILLIAM 2830 NEEDLE PALM EDGEWATER FL 32141	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WATSON, JEANNETTE 4 LAUGHING GULL LANE EDGEWATER FL 32141	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FERGUSON, WILLIAM 1508 VIRGINIA AVE, 111A DAYTONA BEACH, FL. 32114	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ANDERSON, WILLIAM 1730 PINE TREE DR EDGEWATER, FL. 32141	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BALLWAGE, FRANK 2217 YULE TREE DR EDGEWATER, FL 32141	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SUSSENBERGER, ELLIE 8 CHIP LANE NEW SMYRNA BEACH, FL. 32168	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FERGUSON, DONNA 1508 VIRGINIA AVE, 111A DAYTONA BEACH, FL. 32114	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SINICKI, ANTHONY 3122 ROYAL PALM DR EDGEWATER, FL 32141-6112	<input type="checkbox"/> Change <input checked="" type="checkbox"/> 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: **WILLIAM R. FERGUSON**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-5-01
 Date

253-6346
 Daytime Phone #

CR2E037 (10/00)