2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: DATSYALLBURNETTR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

FILED May 17, 2000 8:00 am Secretary of State DOCUMENT # **742891** 1. Entity Name THE PENSACOLA EAGLES C.B. CLUB. NO. 101, INC. 05-17-2000 90913 027 ****61.25 Principal Place of Business Mailing Address PENSACOLA EAGLES CB CLUB 515 E. AVERY ST 27 ARCHER AVE PENSACOLA FL 32503-5219 PENSACOLA FL 32505 2. Principal Place of Business 3. Mailing Address 621 W LAKEVIEW AVE Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number ENSACOLA 59-1766324 Not Applicable Country US \$8.75 Additional Zip Country 5. Certificate of Status Desired 3250 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent AWSON Box Number is Not Acceptable) NORRIS, SR. H 515 E AVERY ST ENSACOLA LL PENSACOLA FL 32503 SACOL mits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. (NOTE, Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. Delete Change ☐ Addition TITLE TITLE BAWSON, ELIX GZI W AVERY STREET NAME Norris, Sr. H NAME STREET ADDRESS STREET ADDRESS 515 E AVERY ST ENSACOLA FL 32501 CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL Change Delete TITLE ☐ Addition TITLE MCCANTS, WOODROW DAWSON, ELIX NAME NAME 703 WEST BROAD STREET STREET ADDRESS STREET ADDRESS **621 W LAKEVIEW AVE** ENSACOLA FL 32514 CITY-ST-ZIP CITY-ST-7IP PENSACOLA FL 32505 __.Change_. Addition-Delete SD≂ ≂∞≃---TITLE TITLE BURNETT JENKINS, ANNIE NAME NAME 2319 NORTH "D" STREET STREET ADDRESS STREET ADDRESS 2000 NO S STREET CITY-ST-ZIP PENSACOLA CITY-ST-7/P PENSACOLA FL ☐ Change ☐ Addition STD ☐ Delete TITLE TITLE WATSON, LULA NAME NAME STREET ADDRESS STREET ADDRESS 1013 NO C ST CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL ☐ Addition Delete ☐ Change TITLE MT TITLE NAME MC CAYTS, WOODROW NAME STREET ADDRESS STREET ADDRESS 703 WEST BROAD CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL ☐ Delete TITLE ☐ Change ☐ Addition NAME Martin, Sammie L. NAME STREET ADDRESS 6417 HAMPTON RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP PENSACOLA FL 32514 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 emapwered.