

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 745119

1. Entity Name

THE HAGAR VIKING CLUB OF CENTRAL FLORIDA, INCORP



FILED
Sep 05, 2000 8:00 am
Secretary of State

09-05-2000 90041 045 ****61.25

Principal Place of Business

SPRIMONT, RENEE
945 LARSON DRIVE
ALTAMONTE SPRINGS FL 32714
US

Mailing Address

945 LARSON DRIVE
ALTAMONTE SPRINGS FL 32714
US

2. Principal Place of Business

Nils Gustafsson
Suite, Apt. #, etc.

3. Mailing Address

3309 Monteen Drive
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Orlando, FL, 32806

4. FEI Number

59-1877109

Applied For

Not Applicable

Zip

Country

Zip

Country

32806 Orange

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPRIMONT, RENEE
945 LARSON DRIVE
ALTAMONTE SPRINGS FL 32714

7. Name and Address of New Registered Agent

Name

Gustafsson, Nils

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

3309 Monteen Drive

City

Orlando, FL,

FL

Zip Code

32806

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

Nils Gustafsson

Nils Gustafsson

8-30-2000

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

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

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

TITLE PD
NAME SPRIMONT, RENEE
STREET ADDRESS 945 LARSON DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714 ☒ Delete

TITLE VPD
NAME GUSTAFSSON, NILS
STREET ADDRESS 3309 MONTEEN DRIVE
CITY-ST-ZIP ORLANDO FL 32806 ☐ Delete

TITLE SD
NAME BEAN, GEORGE
STREET ADDRESS 4078 SUMMERWOOD AVE.
CITY-ST-ZIP ORLANDO FL 32812 ☒ Delete

TITLE TD
NAME EDSTROM, BRITT
STREET ADDRESS 1830 TOURNAMENT DR
CITY-ST-ZIP APOPKA FL 32712 ☐ Delete

TITLE ALD
NAME KLINT, HENRY
STREET ADDRESS 2104 NEW VICTOR RD
CITY-ST-ZIP OCOEE FL 34761 ☒ Delete

TITLE CP
NAME JENSEN, ISABELLE
STREET ADDRESS 1205 ALTON DR
CITY-ST-ZIP APOPKA FL 32703 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME Gustafsson, Nils
STREET ADDRESS 3309 Monteen Drive
CITY-ST-ZIP Orlando FL 32806 ☒ Change ☐ Addition

TITLE VPD
NAME Turner, Henry
STREET ADDRESS 615 Rugby Street
CITY-ST-ZIP Orlando, FL, 32804 ☐ Change ☒ Addition

TITLE SD
NAME Caterina, Karin
STREET ADDRESS 190 Pine Knoll Court
CITY-ST-ZIP Casselberry, FL, 32707 ☐ Change ☒ Addition

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

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

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

Nils Gustafsson

Nils Gustafsson

Date

Daytime Phone #

407-951-7314
8-30-2000

CP2E037 (5/00)