

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Jul 20, 2000 8:00 am**
Secretary of State

07-20-2000 90036 001 ****61.25

07-20-2000 90036 002 ****8.75

DOCUMENT # 747361

1. Entity Name

CLOVER LEAF FARMS CLUB, INC.

Principal Place of Business

900 N. BROAD STREET
SUITE 4231
BROOKSVILLE FL 34601
US

Mailing Address

900 N. BROAD STREET
SUITE 4231
BROOKSVILLE FL 34601
US

2. Principal Place of Business

3090 WESTLAND RD

Suite, Apt. #, etc.

BROOKSVILLE

City & State

FLORIDA

Zip

34601

Country

HERNANDO

3. Mailing Address

3090 WESTLAND RD

Suite, Apt. #, etc.

BROOKSVILLE

City & State

FLORIDA

Zip

34601

Country

HERNANDO

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2347675☒ Applied For☐ Not Applicable

5. Certificate of Status Desired

☒**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

CAVANAUGH, GEORGE
900 NORTH BROAD STREET
SUITE 4231
BROOKSVILLE FL 34601

7. Name and Address of New Registered Agent

Name

LYDIA W. LITTELL

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

3090 WESTLAND ROAD

City

BROOKSVILLE

FL

Zip Code

34601

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

LYDIA W. LITTELL, TREASURER

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

(NOTE: Registered Agent signature required when reinstating)

7/10/00

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	GLODEN, THOMAS	900 NORTH BROAD STREET #4602	BROOKSVILLE FL 34601	<input type="checkbox"/>
P	DELANEY, HUGH	900 NORTH BROAD STREET, #5335	BROOKSVILLE FL 34601	<input type="checkbox"/>
S	PALMER, EVALINA	900 NORTH BROAD STREET #18	BROOKSVILLE FL 34601	<input type="checkbox"/>
T	CAVANAUGH, GEORGE	900 N. BROAD #4231	BROOKSVILLE FL	<input checked="" type="checkbox"/>
D	HOLDRIDGE, MURIEL	900 NORTH BROAD STREET #3105	BROOKSVILLE FL 34601	<input type="checkbox"/>
D	SCHMIDT, LLOYD	900 NORTH BROAD STREET 32458	BROOKSVILLE FL 34601	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
P	GLODEN, THOMAS	4602 DOWNGATE LANE	BROOKSVILLE, FL 34601	<input checked="" type="checkbox"/>	<input type="checkbox"/>
P	DELANEY, HUGH	5335 HARRINGTON ST.	BROOKSVILLE, FL. 34601	<input checked="" type="checkbox"/>	<input type="checkbox"/>
S	PALMER, EVALINA	18 CLOVERLEAF CIRCLE	BROOKSVILLE, FL. 34601	<input checked="" type="checkbox"/>	<input type="checkbox"/>
T	LITTELL, LYDIA W.	3090 WESTLAND RD.	BROOKSVILLE, FL. 34601	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	HOLDRIDGE, MURIEL	3105 ELLIS COURT	BROOKSVILLE, FL. 34601	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	SCHMIDT, LLOYD	4258 TIPPERARY LANE	BROOKSVILLE, FL. 34601	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/00 352-799-5197

Date

Daytime Phone #