

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 23, 2000 8:00 am
Secretary of State

03-23-2000 90006 050 ****61.25

DOCUMENT # 748662

1. Entity Name

PINELLAS COUNTY JUNIOR GOLF ASSOCIATION, INC.

Principal Place of Business

ADAM C. STUCK
513 42ND AVE. NORTH
ST. PETERSBURG FL 33703

Mailing Address

ADAM C. STUCK
513 42ND AVE. NORTH
ST. PETERSBURG FL 33703-5720

826001



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

59-1971232

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

STUCK, ADAM C
513 42ND AVENUE NORTH
ST. PETERSBURG FL 33703

Name

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

City

FL

Zip Code

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

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
 NAME **PD STUCK, ADAM C**
 STREET ADDRESS **513 42ND AVENUE NORTH**
 CITY-ST-ZIP **ST. PETERSBURG FL 33703**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **VD BAKER, NORM**
 STREET ADDRESS **745 PINELLAS BAYWAY #306**
 CITY-ST-ZIP **TIERRA VERDE FL 33715**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **SD WALTMAN, DAVID R**
 STREET ADDRESS **6797 28TH AVENUE NORTH**
 CITY-ST-ZIP **ST. PETERSBURG FL 33710**

TITLE Change Addition
 NAME **SD WALTMAN, DAVID R**
 STREET ADDRESS **2275 62ND AVE N # 5103**
 CITY-ST-ZIP **ST. PETERSBURG, FL 33702**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: *Adam C. Stuck* **ADAM C. STUCK**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

17 MAR 00

Date

727-893-7800

Daytime Phone #