

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2001 8:00 am
Secretary of State

02-03-2001 90015 022 ****61.25

DOCUMENT # 751505

1. Entity Name

PINELLAS GENEALOGY SOCIETY, INC.

Principal Place of Business

**8476 - 15TH WAY NORTH
 ST. PETERSBURG FL 33702-2812**

Mailing Address

**8476 - 15TH WAY NORTH
 ST. PETERSBURG FL 33702-2812**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2374859

Applied For

Not Applicable

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

**HAZEL, MARJORIE E.
 8476-15TH WAY NORTH
 ST. PETERSBURG FL 33702-2812**

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 **GRANDMAISON, CHAD**
 STREET ADDRESS **7068 4TH AVE S**
 CITY-ST-ZIP **SAINT PETERSBURG FL 33707-1030**

TITLE ☐ Change ☐ Addition
 NAME **T GRANDMAISON, Charles J**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **BRONICK, ROSANNE**
 STREET ADDRESS **1715 SHIRLEY PLACE**
 CITY-ST-ZIP **LARGO FL 33770 - 2222**

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

TITLE ☐ Delete
 NAME **SD PARDUN, BARBARA**
 STREET ADDRESS **6245 29TH WAY N**
 CITY-ST-ZIP **ST. PETERSBURG FL 33702**

TITLE ☒ Change ☐ Addition
 NAME **SD PARDUN, Barbara**
 STREET ADDRESS **146 - 6 AVE NE, APT #9**
 CITY-ST-ZIP **ST Petersburg, FL 33701**

TITLE ☐ Delete
 NAME **TD HOSTETLER, DAMON**
 STREET ADDRESS **107 N CYPRESS AVE**
 CITY-ST-ZIP **CLEARWATER FL 33765**

TITLE ☐ Change ☐ Addition
 NAME **TD**
 STREET ADDRESS **107 IV CYPRESS AVE**
 CITY-ST-ZIP **Clearwater, FL 33765-3104**

TITLE ☒ Delete
 NAME **DE ROLF, THERESA**
 STREET ADDRESS **100 BLUFF VIEW DRIVE, #108A**
 CITY-ST-ZIP **BELLEAIR BLUFFS FL 33770**

TITLE ☐ Change ☐ Addition
 NAME **VPD TANNER, Robert F.**
 STREET ADDRESS **2221 Norwegion Dr Apt #1**
 CITY-ST-ZIP **Clearwater, FL 33763-2958**

TITLE ☐ Delete
 NAME **D MARJORIE HAZEL**
 STREET ADDRESS **8476-15 WAY N**
 CITY-ST-ZIP **ST PETERSBURG FL**

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:

Margorie E. HAZEL
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

727-576-4899
 Daytime Phone #

CR2E037 (10/00)

KHlechner

913079

2001 ADDITIONS to Officers & Directors

PD

RAUP, Robert A.

308-12TH AVE.

Indian Rocks Beach, FL 33785-3827

#751505

CSD

BUTTS, Lesleigh L.

13693-87TH AVE N.

Seminole, FL 33776-2624

ET

RAUP, Bette L.

308-12TH AVE

Indian Rocks Beach, FL 33785-3827