

2000 UNIFORM BUSINESS REPORT (UBR)

3/

DOCUMENT # 751848

1. Entity Name

THE LADIES AUXILIARY OF THE GREATER TAMPA SHOWME

Principal Place of Business

608 N. WILLOW AVE.
TAMPA FL 33606

Mailing Address

608 N. WILLOW AVE.
TAMPA FL 33606-1340

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

59-0590097

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

THOMAS, LILLIAN A
12734 WOOD TRAIL BLVD
TAMPA FL 33625

7. Name and Address of New Registered Agent

Name

JEANETTE A. WEISS

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

500 S. HIMES AVE #19

TAMPA FL.

City

TAMPA

FL

Zip Code

33609

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

Jeanette A. Weiss

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

(NOTE: Registered Agent signature required when reinstating)

3-7-2000

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

TITLE	PD	☒ Delete
NAME	ROJAS, ROSEMARY	
STREET ADDRESS	10205 HIGH AVE	
CITY-ST-ZIP	TAMPA FL 33610	
TITLE	VD	☒ Delete
NAME	LEILA, NICOLLE W.	
STREET ADDRESS	3607 CORONA AVE	
CITY-ST-ZIP	TAMPA FL 33629	
TITLE	VD	☐ Delete
NAME	WILSON, MONICA R	
STREET ADDRESS	8703 IMPERIAL CT	
CITY-ST-ZIP	TAMPA FL 33635	
TITLE	VD	☐ Delete
NAME	ATKINS, ASHLYN	
STREET ADDRESS	4504 CAMERON AVE	
CITY-ST-ZIP	TAMPA FL 33641	
TITLE	SD	☐ Delete
NAME	WEISS, JEANETTE	
STREET ADDRESS	500 S HIMES #19	
CITY-ST-ZIP	TAMPA FL 33609	
TITLE	TD	☒ Delete
NAME	KENNEDY, MELISSA	
STREET ADDRESS	10958 TAYLOR RD	
CITY-ST-ZIP	THONOTOSASSA FL 33592	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	President	☐ Change ☒ Addition
NAME	JOAnn KOZA		
STREET ADDRESS	3837 Northdale Blvd # 342		
CITY-ST-ZIP	TAMPA, FL. 33624		
TITLE	VD	1ST VICE President	☒ Change ☐ Addition
NAME	Monica R. Wilson		
STREET ADDRESS	8703 IMPERIAL CT.		
CITY-ST-ZIP	TAMPA, FL. 33635		
TITLE	VP	2ND VICE President	☒ Change ☐ Addition
NAME	Ashlyn Atkins		
STREET ADDRESS	4504 CAMERON AVE		
CITY-ST-ZIP	TAMPA FL 33641		
TITLE	VD	3RD VICE President	☐ Change ☒ Addition
NAME	Leah O'Neil		
STREET ADDRESS	680 Lovell		
CITY-ST-ZIP	ST. PAUL, MN. 55113		
TITLE	SD	SECRETARY	☐ Change ☐ Addition
NAME	JEANETTE A. WEISS		
STREET ADDRESS	500 S. HIMES #19		
CITY-ST-ZIP	TAMPA FL. 33609		
TITLE	TD	Lillian Thomas	☐ Change ☒ Addition
NAME	12734 WOOD TRAIL BLVD.		
STREET ADDRESS	TAMPA, FL. 33625		

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:

Jeanette A. Weiss

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
May 10, 2000 8:00 am
Secretary of State

03-14-2000 90040 025 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)