

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 752294

1. Entity Name

YAUPON GARDEN CLUB, INC.

Principal Place of Business

Mailing Address

302 AVENUE FN
CARRABELLE FL 32322
US

P. O. BOX 727
LANARK VILLAGE FL 32323-0727
US

2. Principal Place of Business

302 Avenue FN

Suite, Apt. #, etc.

City & State

Carrabelle, FL

Zip

32322

Country

Franklin

3. Mailing Address

PO Box 727

Suite, Apt. #, etc.

PO Box 727

City & State

LANARK VILLAGE, FL

Zip

32323-0727

Country

Franklin

6. Name and Address of Current Registered Agent

GARRISS, ANN
37-4 PINE STREET
P.O. BOX 421
LANARK VILLAGE FL 32323

7. Name and Address of New Registered Agent

Name GARRISS, ANN

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

37-4 PINE STREET

PO Box 421

City

LANARK VILLAGE

FL

Zip Code

32323

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

Ann Garriss

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

TITLE PT ☒ Delete
NAME CLAWSON, LAWRENCE
STREET ADDRESS 2211 LOUISIANA ST, PO BIX 1425
CITY-ST-ZIP LANARK VILLAGE FL 32323

TITLE VPT ☒ Delete
NAME GARRIS, ANN
STREET ADDRESS 37-4 PINE ST, PO BOX 421
CITY-ST-ZIP LANARK VILLAGE FL 32323

TITLE ST ☐ Delete
NAME SCHMIDT, HELEN
STREET ADDRESS 310 6TH ST PO BOX 571
CITY-ST-ZIP CARRABELLE FL

TITLE T ☐ Delete
NAME JONES, DOROTHY L.
STREET ADDRESS 3 PINE ST. PO BOX 727
CITY-ST-ZIP LANARK VILLAGE FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PT ☒ Change ☐ Addition
NAME HAGARTY, GINNY
STREET ADDRESS 1 EIM STREET PO BOX 1394
CITY-ST-ZIP LANARK VILLAGE, FL 32323

TITLE VPT ☒ Change ☐ Addition
NAME HAGARTY, JACK
STREET ADDRESS 1 EIM STREET PO BOX 1394
CITY-ST-ZIP LANARK VILLAGE, FL 32323

TITLE ST ☐ Change ☐ Addition
NAME SCHMIDT, HELEN
STREET ADDRESS 310 6TH ST, PO BOX 571
CITY-ST-ZIP CARRABELLE, FL 32322

TITLE T ☐ Change ☐ Addition
NAME JONES, DOROTHY L.
STREET ADDRESS 3 PINE ST PO BOX 727
CITY-ST-ZIP LANARK VILLAGE, FL 32323

TITLE ☐ Change ☐ Addition
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:

DOROTHY L. JONES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-00

850-697-3419

Date

Daytime Phone #

FILED
Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90098 008 ****61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0095045

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required