

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 752678

1. Entity Name

FLORIDA WOODWORKERS ASSOCIATION, INC.

Principal Place of Business

P.O. BOX 1023
FT WALTON BCH FL 32547

Mailing Address

P.O. BOX 1023
FT WALTON BCH FL 32547

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2891992

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WOLNIEWICH, PETER
106 WOODBINE CIRCLE
FORT WALTON BEACH FL 32548

7. Name and Address of New Registered Agent

Name Douglas D Handley
Street Address (P.O. Box Number is Not Acceptable)
421 CORUET ST
City Fort Walton Beach FL FL Zip Code 32547

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 Douglas D Handley Douglas D Handley May 17, 2001
Signature, type 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	PD	<input type="checkbox"/> Delete
NAME	WOLNIEWICH, PETER	
STREET ADDRESS	106 WOODBINE CIRCLE	
CITY-ST-ZIP	FORT WALTON BEACH FL 32548	
TITLE	VT	<input type="checkbox"/> Delete
NAME	COUNSMAN, RANDAL	
STREET ADDRESS	53 5TH AVENUE, BOX 294	
CITY-ST-ZIP	SHALIMAR FL 32579	
TITLE	ST	<input type="checkbox"/> Delete
NAME	STONE, GEORGE	
STREET ADDRESS	43 HOLLY AVENUE	
CITY-ST-ZIP	SHALIMAR FL 32579	
TITLE	TD	<input type="checkbox"/> Delete
NAME	HANDLEY, DOUGLAS	
STREET ADDRESS	421 CORUET ST	
CITY-ST-ZIP	FT WALTON BCH FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	ADAMS, ED, R	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	4 MEADOWS CIRCLE	
STREET ADDRESS	FORT WALTON BEACH, FL 32548	
CITY-ST-ZIP		
TITLE	EMERY, AL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	402 LEE LANE	
STREET ADDRESS	DESTIN, FL 32541	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: Douglas D Handley Douglas D Handley May 17, 2001 850 862-2654

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CR2E037 (10/00)