2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2001 8:00 am
Secretary of State
03-01-2001 90055 008 ****70.00

DOCUMENT # 756890

1. Entity Name

FLORIDA ALFA CLUB, INC.

Principal Place of Business	Mailing Address
% OSTEEN D. GREENE 1410 PINEAPPLE LANE CLEARWATER FL 34619	% OSTEEN D. GREENE 1410 PINEAPPLE LANE CLEARWATER FL 34619

DO NOT WRITE IN THIS SPACE

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 59-3081442 ☐ 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
GREENE, OSTEEN D. 1410 PINEAPPLE LANE CLEARWATER FL 33759	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	VP RIGALL, DAVID 427 BLANCE AVE TAMPA FL 33606	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Rigall, David 427 Blance Ave Tampa, FL 33606 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHIP, DENYKS 10240 PARSONS ST. TAMPA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HARKELL, WILLIAM 13413 FOREST HILL DR TAMPA FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST GREENE, MARGARET 1410 PINEAPPLE LANE CLEARWATER FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P STILES, RICHARD 13664 KIMBERLY OAKS CIRCLE LARGO FL 33774	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Stiles, Richard 13664 Kimberly Oaks Circle Largo, FL 33774 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GREENE, OSTEEN D. 1410 PINEAPPLE LANE CLEARWATER FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/00)

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: Margaret Greene 02-22-01 727-799-1486
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #