

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2003 8:00 am
Secretary of State

02-14-2003 90211 036 ****61.25

DOCUMENT # 757526

1. Entity Name
GERMAN-AMERICAN CLUB OF ST. AUGUSTINE, INC.



Principal Place of Business
**1985 STATE RD 16
PO BOX 3303
ST AUGUSTINE FL 32085**

Mailing Address
**1985 STATE RD 16
PO BOX 3303
ST AUGUSTINE FL 32085**

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 **59-1741922**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**WEINBERG, MICHELLE
1985 SR 16
ST AUGUSTINE FL 32095**

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Michelle Weinberg*
Signature, typed or printed name of registered agent and title if applicable.

MICHELLE WEINBERG PRES.

DATE

2/10/03

(NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **WEINBERG, MICHELLE**
STREET ADDRESS **1985 SR 16**
CITY-ST-ZIP **ST AUGUSTINE FL**

TITLE **VPD** ☒ Delete
NAME **DUDLEY, GLORIA**
STREET ADDRESS **1985 SR 16**
CITY-ST-ZIP **ST AUGUSTINE FL**

TITLE **VPD** ☒ Delete
NAME **PETZEL, BOB**
STREET ADDRESS **1985 SR 16**
CITY-ST-ZIP **ST AUGUSTINE FL**

TITLE **TD** ☒ Delete
NAME **DUDLEY, WILBUR**
STREET ADDRESS **1985 SR 16**
CITY-ST-ZIP **ST AUGUSTINE FL**

TITLE **SD** ☒ Delete
NAME **JORTZIK, GERTRUD**
STREET ADDRESS **1985 SR 16**
CITY-ST-ZIP **ST AUGUSTINE FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE **VPD** ☒ Change ☐ Addition
NAME **Frederick Rendall**
STREET ADDRESS **1985 SR 16**
CITY-ST-ZIP **St. Augustine, FL**

TITLE **VPD** ☒ Change ☐ Addition
NAME **HAROLD Hertel**
STREET ADDRESS **1985 SR 16**
CITY-ST-ZIP **St. Augustine, FL**

TITLE **TD** ☒ Change ☐ Addition
NAME **Gloria DUDLEY**
STREET ADDRESS **1985 SR 16**
CITY-ST-ZIP **St. Augustine, FL**

TITLE **JD** ☒ Change ☐ Addition
NAME **MARTHA RENDALL**
STREET ADDRESS **1985 SR 16**
CITY-ST-ZIP **St. Augustine**

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:

Wilbur Dudley, Treas.

2/10/03

Daytime Phone #

CR2E037 (10/02)