

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 759875

1. Entity Name

VERO BEACH JAYCEES, INC.

Principal Place of Business

Mailing Address

6780 26TH ST.
P O BOX 1671
VERO BEACH FL 32961

6780 26TH ST.
P O BOX 1671
VERO BEACH FL 32961

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

59-6004565

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

Name

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

City

FL

Zip Code

HOLT, MARK T
615 9TH STREET
VERO BEACH FL 32960

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

TITLE	P	☒ Delete
NAME	BRUCE, LEE	
STREET ADDRESS	185 22 AV	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	VPT	☒ Delete
NAME	SEWELL, DOYLE	
STREET ADDRESS	230 11CT	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE	T	☐ Delete
NAME	HOLT, MARK-T	
STREET ADDRESS	615 9TH STREET	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE	S	☒ Delete
NAME	SEWELL, PEGGY	
STREET ADDRESS	230 11 CT	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE	VP	☐ Delete
NAME	HARROLD, LYNN	
STREET ADDRESS	6656 110 ST	
CITY-ST-ZIP	SEBASTIAN FL 32958	
TITLE	TVP	☐ Delete
NAME	BRUCE, DANNY	
STREET ADDRESS	185 22 AV	
CITY-ST-ZIP	VERO BCH FL 32902	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☒ Change ☐ Addition
NAME	PRESIDENT	
STREET ADDRESS	VICTOR W. REGAN	
CITY-ST-ZIP	751 16 AVE VERO BEACH, FL 32965	
TITLE	S	☒ Change ☐ Addition
NAME	SECRETARY	
STREET ADDRESS	IRENE SHANLEY	
CITY-ST-ZIP	6032 INARIO RA. P-3 FORT PEECE, FL 34951	
TITLE	T	☐ Change ☐ Addition
NAME	TREASURER	
STREET ADDRESS	MARK T. HOLT	
CITY-ST-ZIP	615 9th St VERO BEACH FL 32960	
TITLE	M	☐ Change ☒ Addition
NAME	DOYLE SEWELL - M	
STREET ADDRESS	230 11TH CT	
CITY-ST-ZIP	VERO BEACH, FL 32960	
TITLE	D	☒ Change ☐ Addition
NAME	DIRECTOR	
STREET ADDRESS	LYNN HARROLD	
CITY-ST-ZIP	6656 110 ST SEBASTIAN, FL 32958	
TITLE	D	☐ Change ☐ Addition
NAME	BRUCE, DANNY	
STREET ADDRESS	185 22 AVE	
CITY-ST-ZIP	VERO BEACH, FL 32902	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone if

FILED
Mar 31, 2002 8:00 am
Secretary of State

02-15-2002 90009 018 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)