

2000 UNIFORM BUSINESS REPORT (UBR)

5/1

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

05-01-2000 90370 048 ****61.25

DOCUMENT # 761223

1. Entity Name

NEW PORT RICHEY ELKETTES, INC.

Principal Place of Business

7201 CONGRESS STREET
P.O. BOX 492
NEW PORT RICHEY FL 34653-1835

Mailing Address

7201 CONGRESS STREET
P.O. BOX 492
NEW PORT RICHEY FL 34653-1835

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

59-2152982

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALLEN, ELIZABETH
7848 DUNDEE DR
NEW PT RICHEY FL 34653

7. Name and Address of New Registered Agent

Name

PELLOW, MONTINE

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

7319 Bellows Falls Lane,

City

Bayonet Point,

FL

Zip Code
34667

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

Montine Pellow, Pres.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/20/2000

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	☐ Delete
NAME	ALLEN, ELIZABETH	
STREET ADDRESS	7848 DUNDEE DR	
CITY-ST-ZIP	NEW PT RICHEY FL 34653	
TITLE	VPD	☐ Delete
NAME	WILSON, CORNFE	
STREET ADDRESS	5105 VICTORIA LN	
CITY-ST-ZIP	HOLIDAY FL 34690	
TITLE	S	☐ Delete
NAME	JOHNSON, MARGARET	
STREET ADDRESS	8006 MARK TWAIN LN	
CITY-ST-ZIP	N P RICHEY FL 34668	
TITLE	T	☐ Delete
NAME	HARRIS, JEANNE L	
STREET ADDRESS	7341 INGLESIDE DR	
CITY-ST-ZIP	NEW PORT RICHEY FL 34668	
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	P	☒ Change ☐ Addition
NAME	Pellow, Montine	
STREET ADDRESS	7319 Bellows Falls Lane,	
CITY-ST-ZIP	Bayonet Point, FL 34667	
TITLE	V	☒ Change ☐ Addition
NAME	Craig, Laurie	
STREET ADDRESS	7421 Sandalwood Dr.,	
CITY-ST-ZIP	Port Richey, FL 34668	
TITLE	V	☒ Change ☐ Addition
NAME	Alexander, Peggy	
STREET ADDRESS	5548 Blue Harbor Dr.	
CITY-ST-ZIP	New Port Richey, FL 34653	
TITLE	S	☒ Change ☐ Addition
NAME	Wilson, Corynne	
STREET ADDRESS	4853 Bostonian Loop,	
CITY-ST-ZIP	New Port Richey, FL 34655	
TITLE	T	☐ Change ☐ Addition
NAME	Harris, Jeanne L.	
STREET ADDRESS	7341 Ingleside Dr.,	
CITY-ST-ZIP	Port Richey, FL 34668	
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:

SIGNATURE OF MONTINE PELLOW

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/00

Date

(727) 863-4368

Daytime Phone

CR2E037 (9/99)