

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2001 8:00 am
Secretary of State

03-22-2001 90061 010 ****61.25

DOCUMENT # 762687

1. Entity Name

CLUB 7621, INC.

Principal Place of Business

**C/O WALTER MCALEER
 2254 CITRUS HILL LN.
 PALM HARBOR FL 34683
 US**

Mailing Address

**C/O WALTER MCALEER
 2254 CITRUS HILL LN.
 PALM HARBOR FL 34683
 US**

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

59-2716635

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCALEER, WALTER
 2254 CITRUS HILL LANE
 PALM HARBOR FL 34683**

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	<input type="checkbox"/> Delete
SD	MCALEER, WALTER	2254 CITRUS HILL LANE	PALM HARBOR FL 34683	<input type="checkbox"/>
PD	RODGERS, DAVE J	3653 OVERLAND DR.	HOLIDAY FL 34691	<input checked="" type="checkbox"/>
TD	MACLEAN, DUNCAN	128 LAKE AVOCA DR.	TARPON SPRINGS FL 34689	<input checked="" type="checkbox"/>
VD	MURRAY, DAVID P	152 STAFFORD CIR.	PALM HARBOR FL 34684	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
VD	MCALEER, WALTER	2254 CITRUS HILL LANE	PALM HARBOR, FL 34683	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PD	PAUL CAREY	308 WATERFORD CIR. W.	TARPON SPRINGS, FL 34689	<input type="checkbox"/>	<input checked="" type="checkbox"/>
TD	JOHN WAKEHAM	1111 DARTFORD DR	TARPON SPRINGS, FL 34689	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SD	PETER PERGOLA	5768 STAG THICKET LANE	PALM HARBOR, FL 34685	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	ROBERT WRIGHT	605 WATERFORD CIR. E.	TARPON SPRINGS, FL 34689	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	LAWRENCE CORBETT	630 EUNICE DR.	TARPON SPRINGS, FL 34689	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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: *Walter A. McAleer* **WALTER MCALEER 3/17/01 (727) 789-5622**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)