

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2001 8:00 am
Secretary of State

0064907

DOCUMENT # 768464

1. Entity Name

TAMPA BAY ARMS COLLECTORS ASSOCIATION, INC.

03-19-2001 90038 035 ****61.25

Principal Place of Business

Mailing Address

PO BOX 2313
 LARGO FL 33779

PO BOX 2313
 LARGO FL 33779

2. Principal Place of Business

LARGO FL

3. Mailing Address

1369 REGINA DR W

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LARGO FL

City & State

4. FEI Number

59-2363666

Applied For

Not Applicable

Zip

Country

Zip

Country

33770

PINELLAS

33770

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

KUBES, MARK T
 8440 ULMERTON ROAD
 SUITE 502
 LARGO FL 33771

Name

BOBBY D DOBBS

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

1369 REGINA DR W

City

LARGO FL

FL

Zip Code

33770

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

Bobby D Dobbs

(NOTE: Registered Agent signature required when reinstating)

DATE

3/15/01

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 D
 NAME HOLMES, NORMAN
 STREET ADDRESS 7003 FORREST VIEW CT.
 CITY-ST-ZIP TAMPA FL ☒ Delete

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

TITLE VD
 NAME LYMAN, JOE
 STREET ADDRESS 14449 OAKGLEN DR., N.
 CITY-ST-ZIP LARGO FL 33710 ☒ Delete

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

TITLE D
 NAME BOUNDS, HORACE A
 STREET ADDRESS 1219 RUSSELL DR., N.
 CITY-ST-ZIP ST. PETERSBURG FL ☐ Delete

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

TITLE P
 NAME LAUSTER, DONALD A
 STREET ADDRESS 1280 WELLINGTON DR
 CITY-ST-ZIP CLEARWATER FL 33546 ☐ Delete

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

TITLE D
 NAME LAUSTER, MARY L
 STREET ADDRESS 1280 WELLINGTON DR
 CITY-ST-ZIP CLEARWATER FL 33546 ☐ Delete

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

TITLE D
 NAME DOBBS, ROBERT
 STREET ADDRESS 1369 REGINA DR. WEST
 CITY-ST-ZIP LARGO FL 33770 ☐ Delete

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: *Bobby D Dobbs*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/01 727 581 3232
 Date Daytime Phone #

CR2E037 (10/00)