

# 2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 28, 2002 8:00 am  
Secretary of State

03-28-2002 90362 030 \*\*\*\*69.00

DOCUMENT # 768824

1. Entity Name

THE PASCO COUNTY SECURITY PATROL ASSOCIATION, IN  
C.

Principal Place of Business

STERNIG, JIM  
7531 EMBASSY BLVD  
PORT RICHEY, FL 34668  
US

Mailing Address

7531 EMBASSY BLVD  
PORT RICHEY FL 34668  
US

2. Principal Place of Business

8015 LOTUS DRIVE

Suite, Apt. #, etc.

3. Mailing Address

8015 LOTUS DRIVE

Suite, Apt. #, etc.

City & State

PORT RICHEY, FLORIDA

City & State

PORT RICHEY, FLORIDA

4. FEI Number

59-2877014

Applied For

Not Applicable

Zip

34668

Country

USA

Zip

34668

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

STERNIG, JIM  
7531 EMBASSY BLVD  
PORT RICHEY FL 34668

7. Name and Address of New Registered Agent

Name

DONALD R. PURKISS

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

8015 LOTUS DRIVE

City

PORT RICHEY

FL

Zip Code

34668

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

Donald R. Purkiss

3/13/02

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	NAME	STERNIG, JIM	<input checked="" type="checkbox"/> Delete
STREET ADDRESS			7531 EMBASSY BLVD	
CITY-ST-ZIP			PORT RICHEY FL	
TITLE	V	NAME	HOOPS, CHRIS W.	<input checked="" type="checkbox"/> Delete
STREET ADDRESS			9817 TRADEWINDS DRIVE	
CITY-ST-ZIP			PORT RICHEY FL	
TITLE	T	NAME	GALLAGHER, JAMES F	<input checked="" type="checkbox"/> Delete
STREET ADDRESS			8606 PAXTON DR	
CITY-ST-ZIP			PT RICHEY FL 34668	
TITLE	D	NAME	NUZZI, LOUIS	<input checked="" type="checkbox"/> Delete
STREET ADDRESS			8830 PAXTON DR	
CITY-ST-ZIP			PORT RICHEY FL 34668	
TITLE	D	NAME	LANTZ, BARBARA	<input type="checkbox"/> Delete
STREET ADDRESS			9716 RAINBOW LANE	
CITY-ST-ZIP			PORT RICHEY FL 34668	
TITLE	D	NAME	MOSKOWITZ, ARTHUR	<input type="checkbox"/> Delete
STREET ADDRESS			28538 TWINBROOK LANE	
CITY-ST-ZIP			WESLEY CHAPEL FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	NAME	DONALD R. PURKISS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			8015 LOTUS DRIVE	
CITY-ST-ZIP			PORT RICHEY, FLORIDA 34668	
TITLE	S	NAME	Gail Hawke	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			9816 LAKESIDE LN	
CITY-ST-ZIP			Port Richey, FL 34668	
TITLE	T	NAME	MILDRED A. WEST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			5202 Rubber Tree Cir.	
CITY-ST-ZIP			NEW PORT Richey FL 34653	
TITLE	D	NAME	D.G.W. COOPER	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS			1842 TAMPA BAY	
CITY-ST-ZIP			Wesley Chapel FL 33543-5316	
TITLE	V.P.	NAME	BARBARA J. LANTZ	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			10925 ROSSITER AVE.	
CITY-ST-ZIP			HUDSON, FL 34667	
TITLE	D	NAME	Arthur Moskowitz	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			28538 Twinbrook Ln.	
CITY-ST-ZIP			Wesley Chapel FL 33543	

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:

Donald R. Purkiss

3/13/2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/01)