2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

1/23

FILED
Feb 26, 2003 8:00 am
Secretary of State
01-23-2003 90059 038 ****61.25

DOCUMENT # 770870

1. Entity Name
VOITURE LOCAL #294, INC.

Principal Place of Business	Mailing Address
C/O JOHN COPPOLO 492 LESLIE DR. PORT ORANGE FL 32127	C/O JOHN COPPOLO 492 LESLIE DR. PORT ORANGE FL 32127

☐ CHECK HERE IF MAKING CHANGES

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 59-6178148 ☐ 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
COPPOLO, JOHN 492 LESLIE DR. PORT ORANGE FL 32127	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P RUST, HOLGER 1274 HICKORY LN DELAND FL 32720	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	LARRY WILSON P 525 N.DIXIE HIGHWAY NEW SMYRNA BEACH, FL 32168 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP COLE, WILLIAM T 113 HOTEL AVENUE EDGEWATER FL 32132-2317	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CLARENCE E. SWIMM V P 5025 PALMETTO PORT ORANGE, FL 32127 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S COPPOLA, JOHN 492 LESLIE DRIVE PT ORANGE FL 32127	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WRAGG, GEORGE 205 HERNANDEZ AVENUE ORMOND BEACH FL 32174	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, WENDELL S JR 4578 ALDER DR. PT. ORANGE FL 32127	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T COPPOLO, JOHN 492 LESLIE DR. PT. ORANGE FL 32127	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

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 REQUIRED John Coppolo 1/15/2003 356-722-1059
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

NURSES TRAINING, CHILD WELFARE, YOUTH SPORTS, AMERICANISM, COMRADESHIP

Attachment #

CHEF DE GARE
LARRY WILSON
525 N. DIXIE HWY.
NEW SMYRNA BEACH, FL.
ZIP#32168 PH 386-427-1793

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CORRESPONDANT LOCAL
JOHN F. COPPOLO
492 LESLIE DR.
PORT ORANGE, FL.
ZIP#32127 PH322-1059

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770870

PRESIDENT
LARRY WILSON
525 N. DIXIE HWY.
NEW SMYRNA BEACH, FL. 32168

VICE PRESIDENT
CLARENCE E. SWIMM
5025 PALMETTO AVE.
PORE ORANGE, FL 32127

SECRETORY
JOHN COPPOLO
492 LESLIE DRIVE
PORT ORANGE, FL 32127

DIRECTOR
GEORGE WRAGG
205 HERNANDEZ AVE.
ORMOND BEACH, FL 32174

DIRECTOR
WENDELL SMITH JR.
4578 ALDER DR.
PORT ORANGE, FL 32127

TREASURY
JOHN COPPOLO
492 LESLIE DR.
PORE ORANGE, FL 32127