

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 845576

1. Entity Name

THE IMPERIAL COUNCIL OF THE ANCIENT ARABIC ORDER

Principal Place of Business

2900 ROCKY POINT DRIVE
TAMPA FL 33607

Mailing Address

2900 ROCKY POINT DRIVE
TAMPA FL 33607

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

36-2158164

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

T
NAME
BRACEWELL, GENE
STREET ADDRESS
840 SELIG DRIVE
CITY-ST-ZIP
ATLANTA GA ☒ Delete

T
NAME
BRACEWELL, GENE
STREET ADDRESS
1015 THIMBLEGATE COURT
CITY-ST-ZIP
ALPHARETTA, GEORGIA 30022 ☒ Change ☐ Addition

P
NAME
SEMB, RALPH W
STREET ADDRESS
66 FRENCH KING HWY
CITY-ST-ZIP
ERVING MA 01344 ☒ Delete

P
NAME
TURNIPSEED, ROBERT N.
STREET ADDRESS
2953 NORTH GOVERNMENT WAY
CITY-ST-ZIP
COEUR D'ALENE, IDAHO 83815 ☒ Change ☐ Addition

S
NAME
JONES, JACK H
STREET ADDRESS
2900 ROCKY POINT DRIVE
CITY-ST-ZIP
TAMPA FL ☐ Delete

☐ Change ☐ Addition

V
NAME
TURNIPSEED, ROBERT N
STREET ADDRESS
2953 N GOVERNMENT WAY
CITY-ST-ZIP
COEUR D ALENE ID 83815 ☒ Delete

V
NAME
SMITH, KENNETH W.
STREET ADDRESS
1115 EYRE MOUNT DRIVE
CITY-ST-ZIP
WEST VANCOUVER, B.C. V7S 2B9 ☒ Change ☐ Addition

D
NAME
CLAYPOOL, CHARLES A
STREET ADDRESS
345 W 2ND ST STE 200
CITY-ST-ZIP
DAYTON OH 45402 ☒ Delete

D
NAME
FREVEL, SR., RAOUL L.
STREET ADDRESS
4507 HARFORD ROAD
CITY-ST-ZIP
BALTIMORE, MARYLAND 21214 ☒ Change ☐ Addition

D
NAME
OIEN, M B
STREET ADDRESS
7832 E EBOLA AVE
CITY-ST-ZIP
MESA AZ 85208 ☐ Delete

☐ Change ☐ Addition

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:

Robert N. Turnipseed, President

01/29/01 (813)

Date

Daytime Phone # 281-8110

CR2E037 (10/00)