

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000002959

1. Entity Name

KINGDOM OF THE SUN CHAPTER (TROA) SCHOLARSHIP FU

Principal Place of Business

4501 N.E. 4TH STREET
OCALA FL 34470-9400

Mailing Address

4501 N.E. 4TH STREET
OCALA FL 34470-9400

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

PULVER, WILLIAM D
4501 N.E. 4TH STREET
OCALA FL 34470-9400

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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 D ☐ Delete
NAME SHARE, LOUIS L
STREET ADDRESS 5210 S.W. 89TH PLACE
CITY-ST-ZIP Ocala FL 34476-3867

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

TITLE D ☐ Delete
NAME WEST, WILLIAM R
STREET ADDRESS 9390 S.W. 196TH AVENUE RD.
CITY-ST-ZIP DUNNELLON FL 34432-2769

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

TITLE D ☐ Delete
NAME PULVER, WILLIAM D
STREET ADDRESS 4501 N.E. 4TH STREET
CITY-ST-ZIP Ocala FL 34470-9400

TITLE T/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME INCE, HENRY W
STREET ADDRESS 8875 A S.W. 92ND STREET
CITY-ST-ZIP Ocala FL 34481-7545

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

TITLE D ☐ Delete
NAME KUNZE, ELTON C
STREET ADDRESS 11362 S.W. 77TH AVENUE
CITY-ST-ZIP Ocala FL 34476-4122

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

TITLE D ☒ Delete
NAME PHEIFFER, WILLIAM J
STREET ADDRESS 8832 S.W. 108TH STREET
CITY-ST-ZIP Ocala FL 34481-5377

TITLE S/D ☒ Change ☒ Addition
NAME CLARK, DAWN K
STREET ADDRESS 729 SE 40th AVENUE
CITY-ST-ZIP Ocala, FL 34471-2735

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 of William D. Pulver

WILLIAM D. PULVER 3-2-01 352-624-0057

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)