2001 UNIFORM BUSINESS REPORT (UBR)

Mar 23, 2001 8:00 am Secretary of State DOCUMENT # N0000004011 1. Entity Name FARM CITY WEEK COMMITTEE, INC. 03-23-2001 90003 029 ****61.25 Principal Place of Business Mailing Address 1303 17TH ST. WEST 1303 17TH ST. WEST PALMETTO FL 34221-2934 PALMETTO FL 34221-2934 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-1 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired ____ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) KNOWLES, JAMES W ESQ. 2812 MANATEE AVE. WEST **BRADENTON FL 34205** Zip Code Fl 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Department of State Trust Fund Contribution. Added to Fees FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Addition TITLE TITLE □ Delete GARRISON, RALPH NAME NAME 6012 18TH AVE. EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34208** CITY-ST-ZIP ٧D ☐ Addition □ Delete TITLE Change TITLE ROGERS, BRENDA NAME NAME 1303 17TH ST. WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALMETTO FL=34221 CITY-ST-ZIE SD ☐ Delete TITLE ☐ Change Addition TITLE GLASSBURN, BETTY NAME NAME STREET ADDRESS 1303 17TH ST. WEST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALMETTO FL 34221 ☐ Delete ☐ Change ☐ Addition TITLE TITLE BADEN, EARL W JR. NAME NAME 1101 6TH AVE. WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34205** Change ☐ Addition TITLE ☐ Delete TITLE SWEAT, BOB NAME NAME STREET ADDRESS STREET ADDRESS 305 15TH ST. WEST CITY-ST-ZIP **BRADENTON FL 34205** CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

SIGNATURE:

GNATURE AND TYPED OR PRINTED MANE OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered

12. I hereby certify that the information supplied with this filling 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

3 20 01 941-147-4456

FILED