

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2002 8:00 am
Secretary of State

03-07-2002 90233 049 ****61.25

DOCUMENT # N00000004603

1. Entity Name

GRAND CENTRAL DISTRICT ASSOCIATION, INC.

Principal Place of Business

219 FIRST AVENUE NORTH
 ST. PETERSBURG FL 33713

Mailing Address

2719 FIRST AVENUE NORTH
 ST. PETERSBURG FL 33713

2. Principal Place of Business

2438 CENTRAL AVE

Suite, Apt. #, etc.

ST PETERSBURG

City & State

FL

Zip

33712

Country

USA

3. Mailing Address

2438 CENTRAL AVE

Suite, Apt. #, etc.

ST PETERSBURG

City & State

FL

Zip

33712

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3670910

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

DIBBLE, THOMAS A
 2430 CENTRAL AVENUE
 SAINT PETERSBURG FL 33712

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

Thomas A. Dibble

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/19/02
 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 NAME STREET ADDRESS CITY-ST-ZIP	P GRUSKIN, DAVID 2719 FIRST AVENUE NORTH SAINT PETERSBURG FL 33713	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MLOTOVSKI, ED 1850 CENTRAL AVENUE SAINT PETERSBURG FL 33712	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DIBBLE, TOM 2430 CENTRAL AVENUE SAINT PETERSBURG FL 33712	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D METOUR, CAROL 2220 CENTRAL AVENUE SAINT PETERSBURG FL 33713	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HINST, ROY 2025 CENTRAL AVENUE SAINT PETERSBURG FL 33713	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P-JAMES LONGSTRETH 2437 CENTRAL AVE ST PETERSBURG FL 3313	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP-DOUG LINDER 3200 1st AVES ST PETERSBURG FL 33712	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T-TOM DIBBLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S-BARRY JONES 2101 CENTRAL AVE ST PETERSBURG FL 33713	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-DAVID J. GRUSKIN 2719 1st AVE N ST PETERSBURG FL 33713	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-BOB JEFFREY 710 31st St N ST PETERSBURG FL 33713	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> 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:

Thomas A. Dibble

2/19/02 727-327-3484
 Dating Phone #

CR2E037 (9/01)