## 2002 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Jan 27, 2002 8:00 am Secretary of State **DOCUMENT # N00483** 1. Entity Name SOUTH FLORIDA WOODMEN OF THE WORLD SUNSHINE YOUT 01-27-2002 90015 041 \*\*\*\*61.25 H ASSOCIATION, INC. Principal Place of Business Mailing Address 3730 CLEVELAND HGTS BLVD 3730 CLEVELAND HGTS BLVD LAKELAND FL 33813 LAKELAND FL 33813 US 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. #1 Applied For City & State 4. FEI Number City & State 59-2215000 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired 33813-1212 Fee Required 33813-1212 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) SMITH, R. C JR. 3730 CLEVELAND HGTS BLVD 数 #1 Zip Code LÄKELAND FL 33813 <sub>–1.212</sub> 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition ☐ Delete TITLE TITLE NAME SMITH, R. C JR. NAME STREET ADDRESS 3730 CLEVELAND HGTS BLVD:#5x #1 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 33813-1212 ☐ Change ☐ Addition TITLE VD ☐ Delete TITLE NAME TICE, JAMES L NAME STREET ADDRESS 8 W. THRUSH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP APOPKA FL 32712 -Change ☐ Addition TITLE DST Delete TITLE DST GARRETT, JOAN Molony, Robert Jr NAME NAME 1204 Dosseywood Lane STREET ADDRESS 4624 SAN PAULO CT STREET ADDRESS CITY-ST-ZIP Lakeland FL 33811 CITY-ST-ZIP LAKELAND FL 33813 ☐ Addition ☐ Change ☐ Delete TITLE TITLE KIRSTEIN, JIM NAME NAME STREET ADDRESS STREET ADDRESS P O BOX 5108 CITY-ST-ZIP CITY-ST-ZIP vero Beach FL 32961 ☐ Delete TITI F ☐ Change ☐ Addition TITLE HOLT, LARRY NAME NAME STREET ADDRESS STREET ADDRESS 3115 VALLEY HIGH DRIVE CITY-ST-ZIP CITY-ST-ZIP LAKELAND FL 32961 Delete ☐ Change ☐ Addition TITLE TITLE

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

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3730 CLEVELAND HTS. BLVD. STE. \$ #1

LAKELAND FL 33813 -1212

MCMAHAN, S K

NAME

STREET ADDRESS

CITY-ST-ZIP

Charles Smith, Jr. 1/10/02

863-647-3829

Date

Daytime Phone #