

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00899

1. Entity Name

FLORIDA PAST COMMANDERS CLUB, INC.

**FILED**  
**Jan 19, 2000 8:00 am**  
**Secretary of State**

01-19-2000 90108 023 \*\*\*\*61.25

Principal Place of Business  
2001 OLD ST AUGUSTINE RD  
K-101  
TALLAHASSEE FL 32301-0906  
US

Mailing Address  
2001 OLD ST AUGUSTINE RD  
K-101  
TALLAHASSEE FL 32301-0906  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

4. FEI Number  
**59-2410046**

Applied For  
Not Applicable

Zip  
Country

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

**MATTOX, RAY**  
**316 WEST CENTRAL AVENUE, SUITE 312**  
**WINTER HAVEN FL 33880**

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]  
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

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	SHAFFER, DWIGHT	
STREET ADDRESS	1412 44TH AVENUE	
CITY-ST-ZIP	ELLENTOWN FL 34222	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SPRINGSTON, HERBERT	
STREET ADDRESS	4510 S GRADY AVE	
CITY-ST-ZIP	TAMPA FL	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	JOHNSTON, BOBBY D.	
STREET ADDRESS	1655 EAST AVE. SOUTH	
CITY-ST-ZIP	SARASOTA FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	FLEIG, ROBERT G	
STREET ADDRESS	2001 ST AUGUSTINE RD K-101	
CITY-ST-ZIP	TALLAHASSEE FL 32301-0906	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	FEENEY, JOHN	
STREET ADDRESS	3206 MCKINLEY	
CITY-ST-ZIP	HOLLYWOOD FL 33021	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	KNARR, HARRIET	
STREET ADDRESS	1627 BAYSHORE RD	
CITY-ST-ZIP	NOKOMIS FL 34275	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVID F. BYRON, II	
STREET ADDRESS	856 JAMESTOWN DRIVE	
CITY-ST-ZIP	ROCKLEDGE, FL 32955-8184	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAMES R. CAMPBELL	
STREET ADDRESS	795 N. LAKE HOWARD DRIVE	
CITY-ST-ZIP	WINTER HAVEN, FL 33881-3006	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEBRA J. ROUSH	
STREET ADDRESS	4320 S. LOUIS AVE	
CITY-ST-ZIP	TAMPA, FL 33611-1338	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOYCE KERWOOD	
STREET ADDRESS	1627 BAYSHORE ROAD	
CITY-ST-ZIP	NOKOMIS, FL 34275-1411	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KATHRYN L. ROBINSON	
STREET ADDRESS	3319 BRIAR CLIFF DRIVE	
CITY-ST-ZIP	HOLIDAY, FL 34691-1504	

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]  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/00 (850) 656-2001  
Date Daytime Phone #

CR2E037 (9/99)