200	1 UNIFORM BUS	INESS REPO	PRT (UBR)					
DOCU	JMENT# MOIO	187 V		FILED				
TBSA 1	Parkside Skating Club	or profit)cor	p.)	02 MAR 27 PM 2: 49				
4712	ace of Business - 33rd Avenue North etersburg, FL 33713	Mailing Address P.O. Box 10 Pinellas Pi		0-1845	SECRET TALLAHA	ARY OF ST SSEE, FLOF	ATE RIDA	
2. Principal Place of Business 4712–33rd Ave. No. 3. Mailing Address P.O. Box 18			345		•	•		
Suite, Apt. #, etc. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State St. Petersburg, FL		City & State Pinellas Park, FL		4. FEI Number 59–3	3718946		pplied For ot Applicable	-
Zip 33713	Country. USA:	33780-1845	Country USA	5. Certificate of St		1 60 1/04011]
	6. Name and Address of Current I	Registered Agent		7. Name and Add	fress of New Registe	red Agent		
	Redden	Name			-			
	- 33rd Avenue North etersburg, FL 33713	Street Addres	ss (P.O. Box Number is Not Acceptable)					
			City			FL Zip Coo	<u> </u>	4
9 The above	named antih authorizathia statum at far	dha ayanna f ahaasalaa ita				1 -		4
o. Ille above	e named entity submits this statement for	the purpose of changing its	registered office or regis	ered agent, or both, in	the state of Florida.			1
	/ Winda Redde	\sim			'			
SIGNATURE		<u> </u>	Linda Redden		·	2/7/02		
•	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	: Registered Agent signature requi	red when reinstating)	. 0	ATE		
-	FILE NOW: 	9. Election CampaignTrust Fund Contribu		.00 May Be ed to Fees		ck Payable to ient of State		
10.	OFFICERS AND DIR	CTORS	11.	ADDITIONS/CHANGE	S TO OFFICERS AN	DIRECTORS IN	10	ł
TITLE	President	☐ Delete	TITLE			Change		8
NAME	Linda Redden	\mathcal{T}	NAME					ZE037 (11/00
STREET ADDRESS CITY-ST-ZIP	4712-33rd Avenue No	rth 1	STREET AODRESS					37
 	St. Petersburg, FL	_33713	CITY-ST-ZIP					18
TITLE NAME	Vice - President	∟⊥ Delete	TITLE NAME			Change	Addition	ક
STREET ADDRESS	Jennifer Kiselica	T	STREET ADDRESS					1
CITY-ST-ZIP	1217-32nd Street No St. Petersburg, FL	33713	CITY-ST-ZIP					
TITLE	-Treasurer	Delete	TITLE		· · · · · ·	☐ Change	Addition	
NAME	Cynthia Poust	·· · · · · · · · · · · · · · · · · · ·	NAME	<u> </u>				
STREET ADDRESS CITY-ST-ZIP	5300-38th Avenue No.		STREET ADDRESS CITY-ST-ZIP				İ	1
 _	St. Petersburg, FL	33710	 				57 4 1 57	l
TITLE NAME	Secretary Bonnie Benton	Delete	TITLE NAME		•	∐ Change	Addition	ļ
STREET ADDRESS	789 Placido Way NE	\mathcal{T}	STREET ADDRESS				l	
CITY-ST-ZIP	St. Petersburg, FL	33704	CITY-ST-ZIP					1
TITLE	Board Member	☐ Delete	TITLE			☐ Change	☐ Addition	1
NAME	Pat Carhart	\mathcal{T}	NAME				J	
STREET ADDRESS CITY-ST-ZIP	2223 Blue Tern Drive		STREET ADDRESS CITY-ST-ZIP					
TITLE	Palm Harbor, FL 34	583 Delete	TITLE	······································	-	☐ Change	Addition	
NAME	Board Member Sally Barrett	LJ P≪¢iā	NAME			□ esuña	CT MONITOR	
STREET ADDRESS	1678 Fortune Drive	\mathcal{T}	STREET ADDRESS				1	
CITY-ST-ZIP	Clearwater, FL 337	56 <u>U</u>	CITY-ST-ZIP		<u> </u>			
12. I hereby of indicated of the corporation changed,	certify that the information supplied with the on this report or supplemental report is troporation or the receiver or trustee empower or on an attachment with an address, with	nis filing does not qualify for true and accurate and that my ered to execute this report a healt other like empowered.	he exemption stated in S signature shall have the s required by Chapter 61	ection 119.07(3)(i), Flor same legal effect as if i 7, Florida Statutes; and	ida Statutes, i further made under oath; tha that my name appear	certify that the in I I am an officer of is in Block 10 or I	ormation ir director Block 11 if	
SIGNAT	URE: V Scinda (Qui	V	Linda Redden	Dro- 0"	727	-522 -77 41		