

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90458 011 *****61.25

DOCUMENT # N01000007367

1. Entity Name
LAKELAND, FL. CHAPTER OF THE SPEBSQSA, INC.



Principal Place of Business
**6144 SWALLOW DRIVE
LAKELAND FL 33809**

Mailing Address
**6144 SWALLOW DRIVE
LAKELAND FL 33809**

11002290



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **56-3665448**

Applied For

Not Applicable

Zip

Country

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

**SHRODE, RUSSELL J
6144 SWALLOW DRIVE
LAKELAND FL 33809**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DTS
SHRODE, RUSSELL
6144 SWALLOW DR
LAKELAND FL 33809-5697** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
Shrode, Russell J.
6144 Swallow Dr.
Lakeland, FL 33809-5697** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
MCCLURE, LEE
1031 PENGUIN PLACE
LAKELAND FL 33809** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
Wagner, William
2147 Grand Cypress Dr.
Lakeland, FL 33810** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
BENYO, MICHAEL
1910 CREEKBEND DRIVE
LAKELAND FL 33811-1408** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
Hillis, Stephen
4387 Winding Oaks Circle
Mulberry, FL 33860** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DD DV
St Boldig, JERRY
4423 Fairway Oaks Dr.
Mulberry, FL 33860** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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: **RUSSELL J. SHRODE, TREASURER**
SIGNATURE

4/10/03 **863-859-6473**

CR2E037 (10/02)