

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

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90169 036 ****70.00

DOCUMENT # N02000006455

1. Entity Name

BOY SCOUT TROOP 544, INC.



Principal Place of Business

**1825 W. FRENCH AVENUE
ORANGE CITY FL 32763**

Mailing Address

**1825 W. FRENCH AVENUE
ORANGE CITY FL 32763**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

41-2055557

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**BLACKWELL, TERRY G
235 W. FRENCH AVENUE
ORANGE CITY FL 32763**

7. Name and Address of New Registered Agent

Name: **ROBERT M'CRAV**
Street Address (P.O. Box Number is Not Acceptable)

1825 W. FRENCH AVE
City **ORANGE City** FL Zip Code **32763**

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

Vice President Robert B. McCray 25 Apr 03
(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

TITLE **PD** ☐ Delete
NAME **PISANO, ERIC**
STREET ADDRESS **1531 19TH STREET**
CITY-ST-ZIP **ORANGE CITY FL 32763**

TITLE **VD** ☐ Delete
NAME **MCCRAY, ROBERT**
STREET ADDRESS **1825 W. FRENCH AVENUE**
CITY-ST-ZIP **ORANGE CITY FL 32763**

TITLE **STD** ☐ Delete
NAME **MCCRAY, CATHERINE**
STREET ADDRESS **1825 W. FRENCH AVENUE**
CITY-ST-ZIP **ORANGE CITY FL 32763**

TITLE **D** ☐ Delete
NAME **VOUGH, JIM**
STREET ADDRESS **1021 HANCOCK AVENUE**
CITY-ST-ZIP **DELTONA FL 32728**

TITLE **D** ☐ Delete
NAME **HARTSHORN, BYRON**
STREET ADDRESS **125 SANFORD AVENUE**
CITY-ST-ZIP **DEBARY FL 32728**

TITLE **D** ☒ Delete
NAME **FIFIELD, JERRY**
STREET ADDRESS **1531 OLD DAYTONA CT.**
CITY-ST-ZIP **DELAND FL 32724**
Resigned

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Director** ☐ Change ☒ Addition
NAME **DENNIS CASTLE**
STREET ADDRESS **1210 18th Street**
CITY-ST-ZIP **ORANGE City, FL 32763**

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

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

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] **Robert B. McCray 4/25/03 3861775-1224**

CR2E037 (10/02)