

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90078 037 ****61.25

DOCUMENT # N04040

1. Entity Name

SUNCOAST COCKER SPANIEL CLUB OF GREATER CLEARWATER, INC.

Principal Place of Business

1681 SHERBROOK ROAD
 CLEARWATER FL 34624

Mailing Address

1681 SHERBROOK ROAD
 CLEARWATER FL 34624

2. Principal Place of Business

27515 Ascot St

Suite, Apt. #, etc.

3. Mailing Address

27515 Ascot St

Suite, Apt. #, etc.

City & State

Wesley Chapel FL

City & State

Wesley Chapel FL

4. FEI Number

59-2386075

Applied For

Not Applicable

Zip

33544

Country

Pasco

Zip

33544

Country

Pasco

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

LIPPINCOTT, BARBARA
 27515 ASCOT STREET
 WESLEY CHAPEL FL 33544

7. Name and Address of New Registered Agent

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

After September 13, 2002,
 min. will be \$236.25.

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
	DP	BOWLING, RICHARD	1750 ALBERMARLE RD. CLEARWATER FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	SD	TAYLOR, CONNIE	1952 DODGE ST. CLEARWATER FL 33760	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	CS	ST. JOHN, SANDRA	1681 SHERBROOK ROAD CLEARWATER FL	<input checked="" type="checkbox"/>		CS	Joann Stamm	5550 N. Highland Park Dr Hernando FL 34442	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	T	LIPPINCOTT, BARBARA	27515 ASCOT ST WESLEY CHAPEL FL 33544	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	D	GODERRE, JUDY	621 EMNICE DRIVE TARPON SPRINGS FL 34689	<input checked="" type="checkbox"/>		✓	CHARLES LIPPINCOTT	27515 ASCOT ST. WESLEY CHAPEL FL 33544	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	D	ANDERSON, LINDA	3921 BRIARLAKE DRIVE VALRICO FL 33594	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

CR2E037 (4/02)

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: Barbara Lippincott Barbara Lippincott 9/5/02 (813) 974-6597