

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **NO4433**

1. Entity Name
Pelicans Rugby Club, Inc.

Principal Place of Business

Mailing Address

2. Principal Place of Business
919 W. Ohio Ave
Suite, Apt. #, etc.

3. Mailing Address
919 W. Ohio Ave
Suite, Apt. #, etc.

City & State
Tampa, Florida

City & State
Tampa, Florida

Zip
33603

Country
USA

Zip
33603

Country
USA

4. FEI Number

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name
Adam J. Gormly
Street Address (P.O. Box Number is Not Acceptable)
919 W. Ohio Ave
City
Tampa FL Zip Code
33603

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 **Adam J. Gormly**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE
Oct. 25, 2001

FILE NOW: FEE IS \$61.25
After September 12, 2001, 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: **Adam J. Gormly** **Oct 25, 2001** (813) 272-5630

FILED

OCT 30 PM 1:58

SECRETARY OF STATE
TALLAHASSEE FLORIDA

CR2E037 (5/01)

2012

October 25, 2001


Uniform Business Report
Division of Corporations
Post Office Box 1500
Tallahassee, Florida 32302-1500

Dear Sir or Madam:

Enclosed herewith, please find the 2001 Uniform Business Report for Pelicans Rugby Club, Inc., Document # N04433. Also enclosed is a check # 1008 in the amount of \$61.25; I contacted your office and was informed that this was the only fee I needed to pay in connection with filing the UBR since notice letters sent to Pelicans Rugby Club, Inc. were returned. The representative of your office also instructed me to attach this letter to the UBR.

Please contact me with any questions you may have regarding this matter.

Very truly yours,


Adam J. Gormly
Pelicans Rugby Club, Inc.
919 West Ohio Avenue
Tampa, Florida 33603
(W) (813) 272-5670

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
OCT 26 2001