

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

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

02-21-2003 90234 021 ****61.25

DOCUMENT # N05651

1. Entity Name

SOUTH PASCO COUNTY VOITURE 1576, 40/8, INCORPORATED.



Principal Place of Business

**PO BOX 113
NEW PORT RICHEY FL 34656-113
US**

Mailing Address

**PO BOX 113
NEWPORT RICHEY FL 34656-113
US**

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 **NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CLARK, KENNETH F
7809 BADCLIFFE CIRCLE
PORT RICHEY FL 34668**

7. Name and Address of New Registered Agent

Name **JOHN HERIG**

Street Address (P.O. Box Number is Not Acceptable)

7820 SYCAMORE DR.

NEW PORT RICHEY,

City

FL

Zip Code

34654

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 **JOHN HERIG**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/17/03

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	HERIG, JOHN	7820 SYCAMORE DR	NEW PORT RICHEY FL	<input type="checkbox"/>
D	FORTIN, EUGENE	12220 LONGHORN DR.	BAYONET POINT FL	<input checked="" type="checkbox"/>
D	POZNANSKI, CHESTER	8150 BRENT ST, #743	PORT RICHEY FL 34668	<input checked="" type="checkbox"/>
D	CLARK, KEN	7134 CASTANEA DR	PORT RICHEY FL 34668	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

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
D	SCOTT G. JORDAN	8060 SYCAMORE DR	NEW PORT RICHEY, FL 34654-5633	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	EARL DOYLE	4660 MARINE PKWY T2-105	NEW PORT RICHEY, FL 34652	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	MICHAEL SCHMIDT	5348 COTEE RIVER DR	NEW PORT RICHEY, FL 34652	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

CR2E037 (10/02)

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: **JOHN HERIG**

2/17/03 727/849-1942