

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N06559

1. Entity Name

THE MIDNIGHT PASS SOCIETY, INC.

FILED

Feb 07, 2002 8:00 am  
Secretary of State

02-07-2002 90319 034 \*\*\*\*70.00

Principal Place of Business

Mailing Address

1706 SANDALWOOD DRIVE  
SARASOTA FL 34231  
US

4343 SAWYER RD  
SARASOTA FL 34233  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2480486

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

HERBERT, JAMES P  
1706 SANDALWOOD DR  
SARASOTA FL 34231

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.

SIGNATURE

*James P. Herbert, Chairman*

(NOTE: Registered Agent signature required when reinstating)

DATE

1-14-2002

FILE NOW: FEE IS \$61.25

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 D ☒ Delete  
NAME THEISEN, MIKE C  
STREET ADDRESS 5955 MIDNIGHT PASS RD  
CITY-ST-ZIP SARASOTA FL

TITLE D ☐ Change ☒ Addition  
NAME STANLEY MEUSER  
STREET ADDRESS 116 OSPREY POINT DRIVE  
CITY-ST-ZIP SARASOTA FL 34229

TITLE CD ☐ Delete  
NAME HERBERT, JIM  
STREET ADDRESS 1706 SANDALWOOD DR.  
CITY-ST-ZIP SARASOTA FL

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

TITLE PD ☐ Delete  
NAME WAECHTER, ROBERT  
STREET ADDRESS 6539 PEACOCK RD  
CITY-ST-ZIP SARASOTA FL

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

TITLE D ☐ Delete  
NAME TRIPP, ROBERT  
STREET ADDRESS 1802 STRICKNEY POINT RD #402  
CITY-ST-ZIP SARASOTA FL 34231

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

TITLE D ☐ Delete  
NAME KERR, WANDA  
STREET ADDRESS 5221 OCEAN BLVD SUITE #2 BOX 277  
CITY-ST-ZIP SARASOTA FL 34242

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

TITLE D ☐ Delete  
NAME HOWELL, PHILIP  
STREET ADDRESS 1750 SOUTH POINTE DR  
CITY-ST-ZIP SARASOTA FL 34231

TITLE ☐ Change ☐ Addition  
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

*James P. Herbert*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-14-02 941-923-3317

CR2E037 (9/01)