## **2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR**

## **DOCUMENT # N10202**

1. Entity Name

THE SEMINOLE WARHAWK BAND AIDES BOOSTERS, INC.



**FILED** May 02, 2003 8:00 am Secretary of State

05-02-2003 90197 019 \*\*\*\*61.25

			600 W					
Principal Place of Business 8401 131ST STREET NORTH SEMINOLE FL 33776 US		Mailing Address 8401 131ST STREET NORTH SEMINOLE FL 33776 US			- · <b>-</b>			
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<u> </u>	CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI Number 59	4. FEI Number 59-2693916 Applied For Not Applicable			
Zip Country		Zip Country		5. Certificate of Sta	5. Certificate of Status Desired Sa.75 Additional Fee Required			
6. Name and Address of Current		Registered Agent		7. Name and Addr	7. Name and Address of New Registered Agent			
9283 123	s, suzan b - Brd way north Le Fl 33772			Serata, ddress (P.O. Box Number is No	Serata, Judy (P.O. Box Number is Not Acceptable)  /31st Way N.			
			City	eminole		Zip Code	 9	1
		·· <u></u>	_	<del>-</del>	FL	Zip Code	76	_
<ol><li>The above the obligat</li></ol>	e named entity submits this statement fo tions of registered agent.	r the purpose of changing its reg	istered office or	registered agent, or both, in the	he State of Florida. I am f	amiliar with,	and accept	
SIGNATURE	Nudy Serata	President	Judy	Serata	e4	26/03		
	Signature, typed or puritied name of registered agent	and title if applicable. (NOTE: Reg	gistered Agent signatu	re required when reinstating)	DATE			
	FILE NOW: FEE IS \$61.25	9. Election Campai Trust Fund Contr	• • •	\$5.00 May Be Added to Fees	Added to Fees Florida Department of State			
10.	OFFICERS AND DIF	RECTORS	11.	ADDITIONS/CHANGE	S TO OFFICERS AND DIF	ECTORS IN	10	]_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MULLINS, SUZAN B 9283 123RD WAY NORTH SEMINOLE FL 33772	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Serata, Judy 8273 1315+ Was Seminole, FL	v N.	Change	☐ Addition	CR2E037 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BRUCKLER, JACKIE 9155 79TH AVENUE NORTH SEMINOLE FL 33777	☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5D Fischer, Debora 9406 Anne Ct. Seminole, FL.		Change	☐ Addition	CR2E
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SMARIDGE, VICKI 9575 131ST STREET NORTH SEMINOLE FL 33776	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		-	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PROCTOR, ELIZABETH 7305 TAMARIND CIRCLE SEMINOLE FL 33773	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Richman, Eiler 8790 Matthew Seminole, FL.	5 <del>1</del> .	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CHARLES, ALAN 14132 86TH AVENUE NORTH SEMINOLE FL 33776	☐ Delete	TITLE - NAME STREET ADDRESS CITY-ST-ZIP	TD Drenth, Mary 13221 8400 Te Seminole FL 3	rr N.	Change	☐ Addition	

STREET ADDRESS

TITLE

NAME

SIGNATURE:

TD

SEMINOLE FL 33776

13870 80TH AVE NORTH

HEISER, JILL

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

4/29/03 727-539-3019

☐ Change

☐ Addition

<sup>12.</sup> 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.