

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 31, 2001 8:00 am**  
**Secretary of State**

07-31-2001 90002 007 \*\*\*\*61.25

**DOCUMENT # N10769**

1. Entity Name

**ST. PETERSBURG AERIE #3658, FRATERNAL ORDER OF E**

Principal Place of Business

Mailing Address

3712 51ST AVENUE NORTH  
 ST. PETERSBURG FL 33714  
 US

3712 51ST AVENUE NORTH  
 ST. PETERSBURG FL 33714  
 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

**51-0193461**

Applied For

Not Applicable

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

**FITZPATRICK, RICHARD E**  
**4100 62 AVE N**  
**#80**  
**PINELLAS PARK FL 33781**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**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  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**P**  
**HAKLER, FRANK**  
**5769 CALAIS BLVD., #4**  
**ST. PETERSBURG FL 33714**

☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**EDGAR GALARRAGA**  
**6921-395TH**  
**ST PETERSBURG FL 33707**

☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**VP**  
**MCCLINTIC, AL**  
**6315 102 TERRACE NORTH**  
**PINELLAS PARK FL 33782**

☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**HAKLER FRANK**  
**5756 CALAIS BLVD #3**  
**ST PETERSBURG FL 33714**

☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**S**  
**FITZPATRICK, RICHARD E**  
**4100 62 AVE W #80**  
**PINELLAS PARK FL 33781**

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**DT**  
**RUGER, CLARENCE**  
**735 - 43RD AVE NE**  
**ST PETERSBURG FL**

☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**DON TRUMBULL**  
**5335 - 46th Ave N**  
**ST PETERSBURG FL 33707**

☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**DT**  
**DAVIS, STEVEN C**  
**4571 42 AVE N**  
**SAINT PETERSBURG FL 33714**

☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**GARY CRONIN**  
**2520 - 15th Ave N**  
**ST PETERSBURG FL 33713**

☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**DT**  
**DIEHL, BRIAN M**  
**4508 70TH ST N**  
**SAINT PETERSBURG FL 33709**

☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**JIM MORRIS**  
**2520 - 15th Ave N**  
**ST PETERSBURG FL 33713**

☒ Change ☐ 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: **ALAN MCCLINTIC** REGISTERED SECRETARY OF STATE **7-23-01** **727 526 3986**

CR2E037 (10/00)