## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N10961

Entity Name: SOUTH SEMINOLE FLYING CLUB, INC.

FILED Apr 30, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1406 BEVERLY LANE
CASSELBERRY, FL 327073722 US

1051 WILD PINE ROAD
MIMS, FL 32754 US

Current Mailing Address: New Mailing Address:

SOUTH SEMINOLE FLYING CLUB INC P. O. BOX 996 SANFORD, FL 32772 US

FEI Number: 59-3326789 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GREER, RICHARD KEVIN

1406 BEVERLY LANE

CASSELBERRY, FL 327073722 US

TEEL, WESLEY L

1051 WILD PINE ROAD

MIMS, FL 32754 US

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: WESLEY L. TEEL 04/30/2002

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 ALLEY, TOM J
 Name:
 CLIMER, CLYDE H

 Address:
 1108 CARDINAL CREEK PLACE
 Address:
 21 STONEGATE NORTH

 City-St-Zip:
 OVEIDO, FL 327658671
 City-St-Zip:
 LONGWOOD, FL 32779 US

 Name:
 GREER, RICHARD KEVIN
 Name:
 TEEL, WESLEY L

 Address:
 1406 BEVERLY LANE
 Address:
 1051 WILD PINE ROAD

 City-St-Zip:
 CASSELBERRY, FL 327073722 US
 City-St-Zip:
 MIMS, FL 32754 US

 $\label{eq:title:sde} {\sf Title:} \qquad {\sf SD} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf SD} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

Name:GUNTER, DANIELName:COLE, ROBAddress:921 CUTLER DRIVEAddress:722 ADIDAS ROAD

City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: WINTER SPRINGS, FL 32708

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLYDE H. CLIMER PD 04/30/2002