

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

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90292 002 ****61.25

DOCUMENT # N11081

1. Entity Name

DUNNELLO SERTOMA CLUB, INCORPORATED



Principal Place of Business

**11871 ILLINOIS ST
DUNNELLO FL 34431**

Mailing Address

**PO BOX 2067
DUNNELLO FL 34430
DUNNELLO, FL 34430**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUNNELLO

Zip

Country

Zip

Country

4. FEI Number **59-2666894**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DEROSSETT, JERRY
20029 SW 80 PL RD
DUNNELLO FL 34431**

Name

WILSON, DAN

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

10830 SW 185 TERRACE

City

DUNNELLO

FL

Zip Code

34432

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

DAN WILSON

Dan B. Wilson

Treasurer

3/6/03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Delete
NAME **DEROSSETT, JERRY**
STREET ADDRESS **20029 SW 80 PL RD**
CITY-ST-ZIP **DUNNELLO FL 34431**

TITLE **P** ☒ Change ☐ Addition
NAME **ROBERTS, MALLIE**
STREET ADDRESS **5168 W. DAPHNE LN.**
CITY-ST-ZIP **DUNNELLO, FL 34433**

TITLE **D** ☒ Delete
NAME **ROBERTS, MALLIE**
STREET ADDRESS **2238 W. DUNNELLO RD.**
CITY-ST-ZIP **DUNNELLO FL**

TITLE **T** ☐ Change ☒ Addition
NAME **WILSON, DAN**
STREET ADDRESS **10830 SW 185 TERRACE**
CITY-ST-ZIP **DUNNELLO, FL 34432**

TITLE **S** ☐ Delete
NAME **GOLDSMITH, STEPHEN**
STREET ADDRESS **20312 ROBINSON RD**
CITY-ST-ZIP **DUNNELLO FL 34431**

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

TITLE **T** ☒ Delete
NAME **ROBERTS, GERALD**
STREET ADDRESS **21380 W HONEYSUCKLE ST**
CITY-ST-ZIP **DUNNELLO FL 34431**

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

TITLE **D** ☐ Delete
NAME **MARTIN, LOU**
STREET ADDRESS **221 WITHLACOCCHIE TRAIL**
CITY-ST-ZIP **DUNNELLO FL 34434**

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

TITLE **D** ☐ Delete
NAME **LINHART, KEN**
STREET ADDRESS **4326 S.W 159 CT**
CITY-ST-ZIP **DUNNELLO FL 34481**

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:

DAN WILSON

3/6/03

352-489-0595

CR2E037 (10/02)