

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N12112

FILED
Apr 04, 2003
Secretary of State

Entity Name: AMERICAN PRODUCTION AND INVENTORY CONTROL SOCIETY, FLORIDA WEST COAST CHAPTER, INC.

Current Principal Place of Business:

8144 128TH STREET
SEMINOLE, FL 33776 US

New Principal Place of Business:

10250 HAZEL STREET
SEMINOLE, FL 33778 US

Current Mailing Address:

8144 128TH STREET
SEMINOLE, FL 33776 US

New Mailing Address:

10250 HAZEL STREET
SEMINOLE, FL 33778 US

FEI Number: 59-2243338

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUKE, SHIRLEY D
8144 128TH STREET
SEMINOLE, FL 33776 US

Name and Address of New Registered Agent:

DUKE, SHIRLEY D
10250 HAZEL STREET
SEMINOLE, FL 33778 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:

04/04/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BEDELL, JIM D
Address: 1269 DRUID ROAD
City-St-Zip: CLEARWATER, FL 33756 US

Title: VD () Delete
Name: CLAUER, GARY D
Address: 5445 MARINER STREET
City-St-Zip: TAMPA, FL 33609 US

Title: TD () Delete
Name: DUKE, SHIRLEY D D
Address: 8144 128TH STREET
City-St-Zip: SEMINOLE, FL 33776 US

Title: SD () Delete
Name: KILTY, GERALD D
Address: 514 HUMPHRIES
City-St-Zip: SAFETY HARBOR, FL 34695 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CLAUER, GARY D
Address: 5445 MARINER STREET
City-St-Zip: TAMPA, FL 33609 US

Title: VD (X) Change () Addition
Name: BEDELL, JIM D
Address: 1269 DRUID ROAD
City-St-Zip: CLEARWATER, FL 33756 US

Title: TD (X) Change () Addition
Name: DUKE, SHIRLEY D
Address: 8144 128TH STREET
City-St-Zip: SEMINOLE, FL 33776 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SHIRLEY DUKE

TD

04/04/2003

Electronic Signature of Signing Officer or Director

Date