

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 30, 2002 8:00 am
Secretary of State

05-28-2002 91731 036 ****61.25

DOCUMENT # N13329

1. Entity Name

THE GREATER SEFFNER AREA CHAMBER OF COMMERCE, IN C.

Principal Place of Business

Mailing Address

**2314 SO PARSONS AVE
 SEFFNER FL 33584**

**P.O. BOX 1920
 SEFFNER FL 33583-1920**

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

59-2849897

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

**MAGRUDER, PATRICIA A
 115 MARGARET ST
 STE F
 BRANDON FL 33511**

Name

Jeffrey Bassett

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

701 Dr. ML King, Jr. Blvd.

City

Seffner

FL

Zip Code

33584

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

[Signature]

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**After September 13, 2002,
 min. will be \$236.25.**

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	PEO MAGRUDER, PATRICIA A 115 MARGARET ST STE F BRANDON FL 33511	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROBSON, GAYLE 1707 PARONS AVENUE S SEFFNER FL 33584	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BENNETT, JOHN 3902 CORPORATE PARK DR STE 650 TAMPA FL 33619	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUMPKIN, ELVIS 6313 BLOCK DAIRY RD SEFFNER FL 33584-2948	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRICE, BRADLEY 1706 S KINGS WAY AVE SEFFNER FL 33584	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, LINDA 1006 S. TEAKWOOD DR PLANT CITY FL 33566	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MAGRUDER, Patricia A 115 Margaret St Ste F Brandon FL 33511	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Jeffrey Bassett 701 Dr. ML King, Jr. Blvd. Seffner, FL 33584	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Earl Haggabook 702 N. Franklin Street Tampa, FL 33601	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D James Bargo 11808 E. Hwy 92 Seffner, FL 33584	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Dr. Charles Pope 101 Evans St. Brandon, FL 33510	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E037 (4/02)

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: *[Signature]*

7/23/02 813-61-4502