

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

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90145 008 ****70.00

DOCUMENT # N20480

1. Entity Name

ORLANDO ROWING CLUB, INC.



Principal Place of Business

**2200 LEE ROAD
ORLANDO FL 32810**

Mailing Address

**PO BOX 547802
ORLANDO FL 32854**

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 **59-2960931**

Applied For

Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**EHRlich, GARY
1324 POINSETTUA AVENUE
ORLANDO FL 32804**

7. Name and Address of New Registered Agent

Name

MARTIN P. WIENER

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

9455 BELMONT TERRACE

City

OVIEDO

FL

Zip Code

32765

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

Martin P. Wiener

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

(NOTE: Registered Agent signature required when reinstating)

4/23/03
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

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**D
BROWN, TED
1128 NORTH FLORAL WAY
APOPKA FL 32703**

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**TD
DEFORD, HOLLY
4280 KENDRICK DR
ORLANDO FL 32804**

☒ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**PD
EHRlich, GARY
1324 POINSETTIA AVE
ORLANDO FL 32804**

☒ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**D
EHRlich, JOANNE
1324 POINSETTIA AVE
ORLANDO FL 32804**

☒ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**D
HATTER, VICKY
4214 VIXEN COURT
OVIEDO FL 32765**

☒ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**VD
KERREBROCK, GREG
852 SWEETWATER ISLAND CR
LONGWOOD FL 32779**

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VD

☒ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D

☐ Change

☒ Addition

**JEANETTE RICHMOND
2626 ALOMA AVE
WINTER PARK, FL 32792**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D

☒ Change

☐ Addition

**JAMIESON THOMAS
922 GOLFSIDE DRIVE
WINTER PARK, FL 32792**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PD

☐ Change

☒ Addition

**MARTIN WIENER
9455 BELMONT TERRACE
OVIEDO, FL 32765**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TD

☒ 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:

SIGNATURE OF GREG KERREBROCK

4-23-03

407-682-1773

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)