

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N20755**

1. Entity Name

A.P.C.I. EMPLOYEE'S CLUB, INC.**FILED****May 14, 2001 8:00 am**
Secretary of State

05-14-2001 90236 023 ****61.25

Principal Place of Business

**COUNTRY ROAD 64, EAST
AVON PARK FL 33825
US**

Mailing Address

**PO BOX 1100
AVON PARK FL 33825-1100
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2872342

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**PIETY, RITA KIM
1423 STENEWAHEE AVE.
SEBRING FL 33870**

Name

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

City

FL

Zip Code

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.

SIGNATURE *Rita Piety - Bookkeeper*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-26-01**FILE NOW:
FEE IS \$61.25**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 PD ☒ Delete
NAME BIGBIE, KENNETH
STREET ADDRESS 17 WAINWRIGHT WAY
CITY-ST-ZIP AVON PARK FL 33825TITLE PD ☐ Change ☒ Addition
NAME WILLIAMS, MELLIE
STREET ADDRESS 5325 COLUMBUS BLVD.
CITY-ST-ZIP SEBRING, FL 33870TITLE VD ☒ Delete
NAME HANSFORD, BONNIE
STREET ADDRESS 32 WAINWRIGHT WAY
CITY-ST-ZIP AVON PARK FL 33826TITLE VD ☐ Change ☒ Addition
NAME BELLO, KELLY
STREET ADDRESS 44 WAINWRIGHT WAY
CITY-ST-ZIP AVON PARK, FL 33825TITLE SD ☒ Delete
NAME GILLIAM, CHERYL
STREET ADDRESS 13 WAINWRIGHT WAY
CITY-ST-ZIP AVON PARK FL 33825TITLE SD ☐ Change ☒ Addition
NAME ESLINGER, DANIEL
STREET ADDRESS 239 KITE AVE.
CITY-ST-ZIP SEBRING, FL 33872TITLE TD ☒ Delete
NAME FRANZA, MYLINDA
STREET ADDRESS 4175 NE 174TH DR.
CITY-ST-ZIP OKEECHOBEE FL 34972TITLE TD ☐ Change ☒ Addition
NAME WYNN, DEBBIE
STREET ADDRESS 75 WAINWRIGHT WAY
CITY-ST-ZIP AVON PARK, FL 33825TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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:

Mellie Williams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**4-30-01**

Date

Daytime Phone #

CR2E037 (10/00)