

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

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90170 012 ****61.25

DOCUMENT # N25066

1. Entity Name

CHARLOTTE SAILING ASSOCIATION, INC.



Principal Place of Business

**104 SEVILLE PLACE
PORT CHARLOTTE FL 33952
US**

Mailing Address

**104 SEVILLE PLACE
PORT CHARLOTTE FL 33952
US**

20013689



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

23355 MULLINS AVE

3. Mailing Address

23355 MULLINS AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PORT CHARLOTTE FL

City & State

PORT CHARLOTTE FL

Zip

33954

Country

USA

Zip

33954

Country

USA

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHARLES F SEBASTIAN

**104 SEVILLE PLACE
PORT CHARLOTTE FL 33952**

Name

WALTER O. GLASSPOOL

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

23355 MULLINS AVE.

City

PORT CHARLOTTE FL

Zip Code

33954

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 **WALTER O. GLASSPOOL** *Walter O. Glasspool* 16 Jan 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

TITLE	PD	☒ Delete
NAME	RAYMOND, FRED	
STREET ADDRESS	1271 PINE SISKIN DRIVE	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	VPD	☒ Delete
NAME	CURTIS, WILLIAM R	
STREET ADDRESS	3278 GREAT NECK STREET	
CITY-ST-ZIP	PORT CHARLOTTE FL 33952	
TITLE	STD	☒ Delete
NAME	SEBASTIAN, CHARLES F	
STREET ADDRESS	104 SEVILLE PLACE	
CITY-ST-ZIP	PORT CHARLOTTE FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☒ Change ☐ Addition
NAME	WILLIAM CURTIS	
STREET ADDRESS	18173 O'HARA	
CITY-ST-ZIP	PORT CHARLOTTE FL 33948	
TITLE	VPD	☐ Change ☒ Addition
NAME	DARIATASCHUK	
STREET ADDRESS	22362 ADORN AVENUE	
CITY-ST-ZIP	PORT CHARLOTTE FL 33952	
TITLE	STD	☐ Change ☒ Addition
NAME	WALTER O. GLASSPOOL	
STREET ADDRESS	23355 MULLINS AVENUE	
CITY-ST-ZIP	PORT CHARLOTTE FL 33954	
TITLE	D	☐ Change ☒ Addition
NAME	DAVID ATKINSON	
STREET ADDRESS	2307 ST. DAVID'S ISLAND COURT	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	D	☐ Change ☒ Addition
NAME	JAMES STEVENS	
STREET ADDRESS	25189 ZODIAC LANE	
CITY-ST-ZIP	PUNTA GORDA FL 33983	
TITLE	D	☐ Change ☒ Addition
NAME	GARY TRIMMER	
STREET ADDRESS	226 TATE TERR	
CITY-ST-ZIP	PORT CHARLOTTE FL 33952	

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: *Walter O. Glasspool* **WALTER O. GLASSPOOL** 16 Jan 03
941 7648075

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)