

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N26230

1. Entity Name

HEARTLAND RADIO CONTROL CLUB, INC.

**FILED**  
Feb 06, 2001 8:00 am  
Secretary of State

02-06-2001 90244 015 \*\*\*\*\*70.00

Principal Place of Business

OLD WAUCHULA AIRPORT  
WAUCHULA FL 33873  
US

Mailing Address

318 RIVERSIDE DR  
WAUCHULA FL 33873  
US

2. Principal Place of Business

3. Mailing Address

2535 LAKE LILLIAN DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

AVON PARK, FLA.

4. FEI Number

59-2968473

Applied For

Not Applicable

Zip

Country

Zip

Country

33825

HIGHLANDS

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

THOLEN, ROBERT J  
2820 PALO VERDE DRIVE  
AVON PARK FL 33825-8966

Name: MIKE GIDDENS

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

2535 LAKE LILLIAN DRIVE

City

AVON PARK

FL

Zip Code

33825

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 MIKE GIDDENS

*Mike Giddens*

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  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME PATTERSON, PAT  
STREET ADDRESS 318 RIVERSIDE DR  
CITY-ST-ZIP WAUCHULA FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VPD  
NAME PACE, LEWIS  
STREET ADDRESS RT 2 BOX 363 N/A  
CITY-ST-ZIP WAUCHULA FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TD  
NAME GIDDENS, MIKE  
STREET ADDRESS 2535 LAKE LILLIAN DR.  
CITY-ST-ZIP AVON PARK FL 33825 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SD  
NAME THOLEN, ROBERT J  
STREET ADDRESS 2820 PALO VERDE DRIVE  
CITY-ST-ZIP AVON PARK FL 33825-8966 ☒ Delete

TITLE S/T  
NAME MIKE GIDDENS  
STREET ADDRESS 2535 LAKE LILLIAN DR.  
CITY-ST-ZIP AVON PARK, FLA. 33825 ☒ Change ☐ Addition

TITLE SO  
NAME HERNANDEZ, RAYMOND  
STREET ADDRESS 801 E. STATE ST  
CITY-ST-ZIP AVON PARK FL 33825 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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: *Mike Giddens*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/01/01

Date

863-224-6318

Daytime Phone #

CR2E037 (10/00)