2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Jan 19, 2000 8:00 am Secretary of State DOCUMENT # **N26421** 1. Entity Name 01-19-2000 90094 015 ****61 25 THE GREATER THONOTOSASSA CIVIC ASSOCIATION, INC. Principal Place of Business Mailing Address PO BOX 1221 PO BOX 1221 THONOTOSASSA FL 33592-1221 THONOTOSASSA FL 33592 C0005536 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2956455 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) TERRELL, MARTHA 10060 HARNEY RD. THONOTOSASSA FL 33592 Zip Code City FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be \Box Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition Change ☐ Delete TITLE TITLE NAME LILLIAN STARK NAME STREET ADDRESS STREET ADDRESS 6305 EUREKA SPRINGS RD CITY-ST-ZIP CITY-ST-ZIP TAMPA FL ☐ Addition ☐ Delete Change VΡ TITLE TITLE ann fabel NAME STREET ADDRESS 12419 PALM TREE DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THONOTOSASSA FL X Change Addition ☐ Delete TITLE Secretary/Treasurer NAME Terrell, Martha NAME Martha Terrell STREET ADDRESS STREET ADDRESS 10060 HARNEY RD. CITY-ST-ZIP 10060 Harney Rd. CITY-ST-7IP THONOTOSASSA FL 33592 Thonotosassa, Fi 33592 Delete TITLE TITLE Director NAME NAME PATRICIA ROGERS Paul O'Byrne STREET ADDRESS STREET ADDRESS 12422 PALM TREE DRIVE 12406 Kelly Place, Thonotosassa, Fl. 33592 CITY-ST-ZIP CITY-ST-ZIP THONOTOSASSA FL **∑** Change Delete TITLE TITLE Director NAME NAME BENNETT, RICHARD Louise Gower STREET ADDRESS STREET ADORESS 4001 MCLANE DR. 10606 Ohio Ave., Thonotosassa, Fl. 33592 CITY-ST-ZIP CITY-ST-ZIP TAMPA FL Change ☐ Addition TITLE Delete TITLE NAME NAME MEIER, DUANE STREET ADDRESS STREET ADDRESS 10512 PHLOX GL. LN. S. CITY-ST-ZIP THONOTOSASSA FL 33592 12. Thereby certify that the information supplied with this filling 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

FILED

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