

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

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

01-21-2003 90040 047 \*\*\*\*61.25

**DOCUMENT # N26584**

1. Entity Name

**SECTION THIRTEEN OF THE ROLLER SKATING RINK OPERATORS ASSOCIATION, INC.**



Principal Place of Business

~~8421 SW 23RD PL~~  
**GAINESVILLE FL 32607**  
**US**

Mailing Address

~~8421 SW 23RD PL~~  
**GAINESVILLE FL 32607**  
**US**

2. Principal Place of Business

**12115 N.W. 1st Lane**

3. Mailing Address

**12115 N.W. 1st Lane**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Gainesville, FL.**

City & State

**Gainesville, FL.**

Zip

**32607**

Country

**USA**

Zip

**32607**

Country

**USA**

4. FEI Number **65-0377557**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**THE PRENTICE HALL CORPORATION SYSTEM, INC.**  
**1201 HAYES ST**  
**STE 105**  
**TALLAHASSEE FL 32301**

Name

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

City

**FL**

Zip Code

7. Name and Address of New Registered Agent

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

*[Signature]*

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

(NOTE: Registered Agent signature required when reinstating)

**1-15-03**

DATE

**✓# 1730110**

**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**  
NAME **WALLACE, MELVIN**  
STREET ADDRESS **8421 SW 23RD PL → 12115 N.W. 1st Lane**  
CITY-ST-ZIP **GAINESVILLE FL 32607**

☐ Delete

TITLE **VPD**  
NAME **BURKETT, ORIS L**  
STREET ADDRESS **8421 SW 23RD PL → 12115 N.W. 1st Lane**  
CITY-ST-ZIP **GAINESVILLE FL 32607**

☐ Delete

TITLE **STD**  
NAME **BURKETT, PATTI**  
STREET ADDRESS **8421 SW 23RD PL → 12115 N.W. 1st Lane**  
CITY-ST-ZIP **GAINESVILLE FL 32607**

☐ Delete

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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CITY-ST-ZIP

☐ Change ☐ Addition

CR2E037 (10/02)

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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR