

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 19, 2001 8:00 am
Secretary of State

07-19-2001 90232 033 ****61.25

0016090

DOCUMENT # N28029

1. Entity Name

THE CLAN MAC ARTHUR SOCIETY, INC.



Principal Place of Business

Mailing Address

6105 11TH AVENUE
 MERIDIAN MS 39305-1220
 US

6105 11TH AVENUE
 MERIDIAN MS 39305-1220
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **54-1195760**

Applied For
 Not Applicable

5. Certificate of Status Desired. **\$8.75 Additional Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RUCKDESCHEL, CHRISTINE
24479 AUDUBON DR
BROOKSVILLE FL 34601

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

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
After September 12, 2001, min. will be \$236.25

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 **MCARTHUR, RUSSEL**
 STREET ADDRESS **6105 11TH AVENUE**
 CITY-ST-ZIP **MERIDIAN MS 39305-1220**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VD** Delete
 NAME **STEWART, SCOTT**
 STREET ADDRESS **6418 CALLE ALKOID**
 CITY-ST-ZIP **TUCSON AZ**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **ESD** Delete
 NAME **MCARTHUR, FAITH**
 STREET ADDRESS **BOX 190**
 CITY-ST-ZIP **PINEHURST NC**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **CSD** Delete
 NAME **MCARTHUR, CATHERINE**
 STREET ADDRESS **8144 AUTUMN PL.**
 CITY-ST-ZIP **MASON OH**

TITLE Change Addition
 NAME **CHRISTINE RUCKDESCHEL**
 STREET ADDRESS **24479 AUDUBON DR**
 CITY-ST-ZIP **BROOKSVILLE FL 34601**

TITLE **TD** Delete
 NAME **MCARTHUR, SCOTT**
 STREET ADDRESS **520 S. COLLEGE ST.**
 CITY-ST-ZIP **MONMOUTH OR**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **MCARTHUR, RUDGER**
 STREET ADDRESS **791 E. MORNINGSIDE DR.**
 CITY-ST-ZIP **ST. GEORGE UT**

TITLE 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: *Christine Ruckdeschel* **CHRISTINE RUCKDESCHEL** 7/13/01 503-838-2430

CR2E037 (5/01)