

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 15, 2002 8:00 am
Secretary of State

07-15-2002 90185 043 ****61.25

DOCUMENT # N30758

Entity Name

OKEECHOBEE COUNTY SHERIFF'S SEARCH AND RESCUE AUXILIARY, INC.

Principal Place of Business

Mailing Address

C/O VINCENT LAMARIANA
 9999 NE 120TH STREET
 OKEECHOBEE FL 34972-5538

C/O VINCENT LAMARIANA
 9999 NE 120TH STREET
 OKEECHOBEE FL 34972-5538



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

C/O Steven D. Nelson

C/O Steven D. Nelson

Suite, Apt. #, etc.

Suite, Apt. #, etc.

203 S.W. PARK ST

203 S.W. PARK STREET

City & State

City & State

Okeechobee, FL

Okeechobee FL

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

34972

USA

34972

USA

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

**NELSON, STEVEN D.
 203 SW PARK STREET
 OKEECHOBEE FL 34972**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**After September 13, 2002,
 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	D	<input type="checkbox"/> Delete
NAME	O'CONNOR, MICHAEL G.	
STREET ADDRESS	1416 HIGHWAY 70 EAST	
CITY-ST-ZIP	OKEECHOBEE FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	LAMARIANA, VINCENT	
STREET ADDRESS	9999 N.E. 120TH STREET	
CITY-ST-ZIP	OKEECHOBEE FL	
TITLE	DT	<input type="checkbox"/> Delete
NAME	NELSON, STEVEN D.	
STREET ADDRESS	1407 S.E. 8TH AVE.	
CITY-ST-ZIP	OKEECHOBEE FL 34974	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *Steven D. Nelson* **STEVEN D NELSON** July 6, 2002 8637635100

CR2E037 (4/02)