## 2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## Mar 02, 2001 8:00 am Secretary of State **DOCUMENT # N32934** BRADENTON RUNNERS CLUB INC. 03-02-2001 90028 044 \*\*\*\*70.00 Principal Place of Business Mailing Address % ALAN MEYER % ALAN MEYER P. O. BOX 1606 P. O. BOX 1606 **BRADENTON FL 34206 BRADENTON FL 34206** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0129127 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ( Spelling error) OREHOWSKY Street Address (P.O. Box Number is Not Acceptable) BREHOWSKY, THOMAS A 5711 6TH AVE NW **BRADENTON FL 34209** 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. HOMAS / KIEHOWSKY IRFASURGE SIGNATURE anature, typed or printed name of regists/ed agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Change ☐ Addition CR2E037 (10/00) TITLE ☐ Delete MEYER, ALAN NAME NAME 1107 EDGEWATER CIR STREET ADDRESS STREET ADDRESS **BRADENTON FL 34209** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE VAN DUZEE, ESTER NAME NAME 539 LAKESIDE DR STREET ADDRESS STREET ADDRESS **BRADENTON FL 34210** CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE Addition TITLE OREHOWSKY, TOM NAME NAME 5711 6TH AVENUE, N.W. STREET ADDRESS STREET ADDRESS **BRADENTON FL** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE HOLLINSWORTH, HANS NAME NAME 3702 32 AVE W STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRADENTON FL** CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition DOUGHERTY, C A NAME NAME 615 DREAM ISLAND RD #304 STREET ADDRESS STREET ADDRESS LONGBOAT KEY FL 34228 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE BROSHEARS, JOHN NAME NAME 1000 RIVERSIDE DRIVE APT B-201 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALMETTO FL 34221 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.

FILED