2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2002 8:00 am
Secretary of State
04-24-2002 90401 038 ****61.25

DOCUMENT # N40608

1. Entity Name

SOUTHEASTERN GREAT OUTDOORS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
P O BOX 142123 CORAL GABLES FL 33114	P O BOX 142123 CORAL GABLES FL 33114

DO NOT WRITE IN THIS SPACE

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 65-0220531 ☐ Applied For ☐ Not Applicable

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
COYLE, THOMAS J 451 NE 35TH ST #204 MIAMI FL 33137	Name DAVE FLETCHER Street Address (P.O. Box Number is Not Acceptable) 2421 N 40 AVE 108 City HOLLYWOOD FL Zip Code 33021

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 Dave Fletcher 10 April 02
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

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WILLIAM, APPERT 6871 S.W. 75 ST. SOUTH MIAMI FL 33143-4424	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DAVE BRACKETT 4312 Royal Palm Ave Miami Bch FL 33140-3019	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD COYLE, THOMAS J 451 NE 35 ST. #204 MIAMI FL 33137	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD FLETCHER, DAVID 2421 N 40TH AVENUE #108 HOLLYWOOD FL 33021-3651	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Dave Fletcher 2421 N 40 Ave 108 Holly Wood FL 33021	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Peter Ellis 400 Kings Lynn Rd. Delray Bch FL 33444	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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 REQUIRED Dave Fletcher 10 April 02 305-899-3146
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #