

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N42013

1. Entity Name

APOLLO BEACH SAIL AND POWER SQUADRON INC.

**FILED**  
**May 22, 2000 8:00 am**  
**Secretary of State**

05-22-2000 90036 002 \*\*\*\*61.25

Principal Place of Business

Mailing Address

CALVARY EVANGELICAL CHURCH  
5309 US HWY 41 N  
APOLLO BEACH FL 33572  
US

P.O. BOX 3706  
APOLLO BEACH FL 33572-3706

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

59-2910390

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

HABERL, ANGELA T  
11322 BLACKBARK DR  
RIVERVIEW FL 33569

Name

Sue Blanton

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

6627 Dolphin Cove Dr

City

Apollo Beach

FL

Zip Code

33572

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

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 PFUHLER, JOHN L  
STREET ADDRESS 806 CHIPAWAY DR.  
CITY-ST-ZIP APOLLO BEACH FL 33572

TITLE PD ☒ Change ☐ Addition  
NAME Bien Martha  
STREET ADDRESS 705 Flamingo Dr  
CITY-ST-ZIP Apollo Beach, FL 33572

TITLE VD ☐ Delete  
NAME BIERI, MARTHA  
STREET ADDRESS 706 FLAMINGO DR.  
CITY-ST-ZIP APOLLO BEACH FL 33572

TITLE VD ☐ Change ☐ Addition  
NAME marrone, Nancy lee  
STREET ADDRESS 6010 murree rd  
CITY-ST-ZIP Tampa, FL 33619

TITLE SD ☐ Delete  
NAME BLANTON, RANDY  
STREET ADDRESS 6519 BIMINI CT.  
CITY-ST-ZIP APOLLO BEACH FL 33572

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD ☐ Delete  
NAME HABERL, ANGELA  
STREET ADDRESS 6514 BIMINI CT.  
CITY-ST-ZIP APOLLO BEACH FL

TITLE TD ☒ Change ☐ Addition  
NAME Sue Blanton  
STREET ADDRESS 6627 Dolphin Cove Dr  
CITY-ST-ZIP Apollo Beach, FL 33572

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

Sue Blanton

4-27-00

813-645-2039

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)