

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N43309

1. Entity Name

JUNGLE TERRACE CIVIC ASSOCIATION, INC.

Principal Place of Business

7101 36TH AVENUE NORTH
ST. PETERSBURG FL 33710

Mailing Address

7101 36TH AVENUE NORTH
ST. PETERSBURG FL 33710-1323

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

59-3067686

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

PLICE, STEVEN
7101 36TH AVENUE NORTH
ST. PETERSBURG FL 33710

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

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 SD ☐ Delete
NAME GOULE, CAROLE
STREET ADDRESS 7101 36TH AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG FL 33710

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

TITLE TD ☐ Delete
NAME MITCHELL, MARY LOU
STREET ADDRESS 7101 36TH AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG FL 33710

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

TITLE PD ☐ Delete
NAME PLICE, STEVEN
STREET ADDRESS 7101 36TH AVE
CITY-ST-ZIP ST PETERSBURG FL 33710

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

TITLE VD ☒ Delete
NAME HARTOUGI, FRANK
STREET ADDRESS 7101 36TH AVE N
CITY-ST-ZIP ST PETERSBURG FL 33710

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

TITLE VD ☐ Delete
NAME MARTIN, JULIE
STREET ADDRESS 7101 36TH AVE N
CITY-ST-ZIP ST. PETERSBURG, FL 33710

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/2000

Date

Daytime Phone #

CR2E037 (9/99)

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

05-22-2000 90049 031 ****61.25



DO NOT WRITE IN THIS SPACE