

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N43309

FILED
Sep 09, 2002
Secretary of State

Entity Name: JUNGLE TERRACE CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

7101 36TH AVENUE NORTH
ST. PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

7101 36TH AVENUE NORTH
ST. PETERSBURG, FL 33710

New Mailing Address:

FEI Number: 59-3067686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: VENEZIA, CANDACE
Address: 7101 36TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: TD () Delete
Name: MITCHELL, MARY LOU
Address: 7101 36TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: PD () Delete
Name: PLICE, STEVEN
Address: 7101 36TH AVE
City-St-Zip: ST PETERSBURG, FL 33710

Title: VD () Delete
Name: MERIDETH, RICHARD
Address: 7101 36TH AVE N
City-St-Zip: ST PETERSBURG, FL 33710

Title: D () Delete
Name: MARTIN, JULIE
Address: 7101 36TH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: SESSIONS, LINDA
Address: 7101 36TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: KILLIAN, TOM
Address: 7101 36TH AVE N
City-St-Zip: ST PETERSBURG, FL 33710

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN PLICE

PD

09/09/2002

Electronic Signature of Signing Officer or Director

Date