

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90098 009 ****61.25

DOCUMENT # N46239

1. Entity Name

SEARS TAMPA BAY RETIREE CLUB, INC.

Principal Place of Business

Mailing Address

6307 NESTING CT
 TAMPA FL 33625
 US

6307 NESTING CT
 TAMPA FL 33625
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3095855

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GARCIA, JOSE M
6307 NESTING CT
TAMPA FL 33625

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

Jose M Garcia
 Signature, typed or printed name of registered agent and title if applicable.

JOSE M. GARCIA, TREASURER

(NOTE: Registered Agent signature required when reinstating)

DATE

Jan. 30, 2001

**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: JOHNSON, CLARENCE
 STREET ADDRESS: 4222 E EMMA ST
 CITY-ST-ZIP: TAMPA FL 33610

TITLE: PD Change Addition
 NAME: N. E. MONTES DE OCA
 STREET ADDRESS: 2359 EMERALD LAKE DR.
 CITY-ST-ZIP: SUN CITY CENTER, FL 33573

TITLE: CSD Delete
 NAME: BROWN, KATHY
 STREET ADDRESS: 3425 CULLENDALE DR
 CITY-ST-ZIP: TAMPA FL

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

TITLE: VD Delete
 NAME: SAAVEDRA, HENRY A
 STREET ADDRESS: 4716 TANNERY AVE
 CITY-ST-ZIP: TAMPA FL 33624

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

TITLE: VD Delete
 NAME: PARKER, JOHN
 STREET ADDRESS: 502 TIMBER POND DR
 CITY-ST-ZIP: BRANDON FL 33510

TITLE: VD Change Addition
 NAME: LLOYD S. VAN SCHOYCK
 STREET ADDRESS: 2936 WINDMOOR DR. S
 CITY-ST-ZIP: PALM HARBOR, FL 34685-1719

TITLE: TD Delete
 NAME: GARCIA, JOSE
 STREET ADDRESS: 6307 NESTING CT
 CITY-ST-ZIP: TAMPA FL

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

TITLE: SD Delete
 NAME: SUE CRISWELL, A M
 STREET ADDRESS: 3607 FLOYD RD
 CITY-ST-ZIP: TAMPA FL

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

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 another like empowered.

SIGNATURE:

Jose M Garcia
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSE M. GARCIA

Date

Daytime Phone #

1/30/01 (813) 962-3484

CR2E037 (10/00)