

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N50741

1. Entity Name

CROATIAN AMERICAN CLUB OF FLORIDA INC.

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

03-22-2000 90188 025 ****61.25

Principal Place of Business

Mailing Address

7047 SUNSET DRIVE
SOUTH PASADENA FL 33707
US

P.O. BOX 41492
ST PETERSBURG FL 33743-1492
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3152106

Applied For

Not Applicable

Zip

Country

Zip

Country

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

HORVATICH, IVANKA
11506 WHISPERING HOLLOW DR
TAMPA FL 33635

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 PD ☐ Delete
NAME SPALATIN, MARIO
STREET ADDRESS 1131 CRESCENT ST.
CITY-ST-ZIP SARASOTA FL 34242

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

TITLE VD ☐ Delete
NAME WINKLER, SILVIA
STREET ADDRESS 10825 INDIAL HILLS DR
CITY-ST-ZIP LARGO FL 33777

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

TITLE VP ☒ Delete
NAME IVANISEVIC, VLATKA
STREET ADDRESS 440 JARDIN LANE
CITY-ST-ZIP SARASOTA FL 34238

TITLE ☒ Change ☐ Addition
NAME VP
STREET ADDRESS Martinovich, Maria
CITY-ST-ZIP 210 Woodland Ct
Safety Harbor, FL 34695

TITLE S ☐ Delete
NAME BOULTON, ANN-MARIE
STREET ADDRESS 15 KELLEY'S TRAIL
CITY-ST-ZIP OLDSMAR FL 34677

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

TITLE SOC ☒ Delete
NAME HORVATICH, IVANKA
STREET ADDRESS 11506 WHISPERING HOLLOW DR
CITY-ST-ZIP TAMPA FL 33635

TITLE ☒ Change ☐ Addition
NAME SOC
STREET ADDRESS Martinovich, Marinko
CITY-ST-ZIP 210 Woodland Ct
Safety Harbor, FL 34695

TITLE T ☒ Delete
NAME BOGOVIC, DUBRAVKA
STREET ADDRESS 11307 GEORGETOWN CIRCLE
CITY-ST-ZIP TAMPA FL 33635

TITLE ☒ Change ☐ Addition
NAME T
STREET ADDRESS Prince, Ljubica
CITY-ST-ZIP 1003 7th St. S.
Safety Harbor, FL 34695

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)