

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 22, 2001 8:00 am
Secretary of State

02-22-2001 90128 021 ****61.25

DOCUMENT # N92000000722

1. Entity Name

WAUCHULA BOARD OF REALTORS, INC.

Principal Place of Business

234 S 6TH AVE
WAUCHULA FL 33873
US

Mailing Address

234 S 6TH AVE
WAUCHULA FL 33873
US

2. Principal Place of Business

402 S. 6th Ave.

Suite, Apt. #, etc.

P.O. Box 1312

City & State

Wauchula, Fl.

3. Mailing Address

402 S. 6th Ave.

Suite, Apt. #, etc.

P.O. Box 1312

City & State

Wauchula, Fl.

Zip

33873

Country

Hardee

Zip

33873

Country

Hardee

4. FEI Number

65-0413826

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

Doris S. Lambert

WRIGHT, LEIGH R

234 S 6TH AVE

WAUCHULA FL 33873

7. Name and Address of New Registered Agent

Name

Doris S. Lambert

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

402 South 6th Ave.

City

Wauchula

FL

Zip Code

33873

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.

Doris S. Lambert, Sec/Trea

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

Feb.16,2001

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

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	FLORES, OCTAVINA	
STREET ADDRESS	220 N 6TH AVE	
CITY-ST-ZIP	WAUCHULA FL 33873	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SEE, JAMES V JR	
STREET ADDRESS	234 S 6TH AVE	
CITY-ST-ZIP	WAUCHULA FL 33873	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	LAMBERT, DORIS L	
STREET ADDRESS	PO BOX 822- 402 56TH AVE	
CITY-ST-ZIP	WAUCHULA FL 33873	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SELLERS, JAMES	
STREET ADDRESS	111 EAST MAIN	
CITY-ST-ZIP	WAUCHULA FL 33873	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HEATH, CHARLES	
STREET ADDRESS	PO BOX 781 - 220 N 6TH AVE	
CITY-ST-ZIP	WAUCHULA FL 33873	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	DASHER, RICHARD L	
STREET ADDRESS	PO BOX 68 - 702 S 6TH AVE	
CITY-ST-ZIP	WAUCHULA FL 33873	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kenneth A. Lambert	
STREET ADDRESS	402 S. 6th Ave.	
CITY-ST-ZIP	Wauchula. Fl. 33863	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Richard F. Dasher	
STREET ADDRESS	702 S. 6th Ave.	
CITY-ST-ZIP	Wauchula, Fl. 33873	
TITLE	S/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Doris S. Lambert	
STREET ADDRESS	402 S.6th Ave.	
CITY-ST-ZIP	Wauchula, Fl. 33873	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Octaviano R. Flores	
STREET ADDRESS	228 N. 6th Ave.	
CITY-ST-ZIP	Wauchula, Fl. 33873	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	James V. See, Jr.	
STREET ADDRESS	206 N. 6th Ave.	
CITY-ST-ZIP	Wauchula, Fl. 33873	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	James K. Sellers	
STREET ADDRESS	111 E. Main St.	
CITY-ST-ZIP	Wauchula. Fl. 33873	

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.

Doris S. Lambert

SIGNATURE:

Doris S. Lambert

02-16-01

(863) 773-0007

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)