

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

0000049

DOCUMENT # N93000000422

1. Entity Name

REALISTS OPPOSING ALLEGED RESTORATION (ROAR), IN C.

Principal Place of Business

Mailing Address

19590 NW 80TH DRIVE
 OKEECHOBEE FL 34972-9664

19590 NW 80TH DRIVE
 OKEECHOBEE FL 34972-9664

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

19425 NW 80th Dr

OKEECHOBEE FL

34972

4. FEI Number

65-0416021

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

THULLBERY, CAROLYN
19590 N.W. 80TH DRIVE
OKEECHOBEE FL 34972

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	<input type="checkbox"/> Delete
NAME	JORDAN, HELEN	
STREET ADDRESS	19970 NW 80TH DR	
CITY-ST-ZIP	OKEECHOBEE FL 34972	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	VICKERS, AUDREY	
STREET ADDRESS	1825 WRIGHT LANE	
CITY-ST-ZIP	LORIDA FL	
TITLE	2VP	<input type="checkbox"/> Delete
NAME	FRUTH, DEBRA	
STREET ADDRESS	964 COUNTRY RD 721 LOT 174	
CITY-ST-ZIP	LORIDA FL 32857	
TITLE	SD	<input type="checkbox"/> Delete
NAME	THULLBERY, CAROLYN E.	
STREET ADDRESS	19590 NW 80TH DRIVE	
CITY-ST-ZIP	OKEECHOBEE FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	MCGREGOR, JEANITA	
STREET ADDRESS	19425 NW 80TH DRIVE	
CITY-ST-ZIP	OKEECHOBEE FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	GRIFFIN, RUTH	
STREET ADDRESS	19220 NW 80 DR.	
CITY-ST-ZIP	OKEECHOBEE FL 34972	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Caroline Thullbery* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/02

Date

863-467-6085

Daytime Phone #

CR2E037 (9/01)