

2002 UNIFORM BUSINESS REPORT (UBR)

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

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

04-01-2002 90161 012 ****61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0416021

Applied For

Not Applicable

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

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 ☐ Delete
NAME JORDAN, HELEN
STREET ADDRESS 19970 NW 80TH DR
CITY-ST-ZIP OKEECHOBEE FL 34972

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

TITLE VPD ☐ Delete
NAME VICKERS, AUDREY
STREET ADDRESS 1825 WRIGHT LANE
CITY-ST-ZIP LORIDA FL

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

TITLE 2VP ☐ Delete
NAME FRUTH, DEBRA
STREET ADDRESS 964 COUNTRY RD 721 LOT 174
CITY-ST-ZIP LORIDA FL 32857

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

TITLE SD ☐ Delete
NAME THULLBERY, CAROLYN E.
STREET ADDRESS 19590 NW 80TH DRIVE
CITY-ST-ZIP OKEECHOBEE FL

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

TITLE TD ☐ Delete
NAME MCGREGOR, JEANITA
STREET ADDRESS 19425 NW 80TH DRIVE
CITY-ST-ZIP OKEECHOBEE FL

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

TITLE D ☐ Delete
NAME GRIFFIN, RUTH
STREET ADDRESS 19220 NW 80 DR.
CITY-ST-ZIP OKEECHOBEE FL 34972

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/02

Date

Daytime Phone #

863-467-6085

CR2E037 (9/01)

0000649