

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000001950

1. Entity Name

PINELLAS HOMESTEAD PROJECT, INC.

**FILED**  
**Jan 12, 2000 8:00 am**  
**Secretary of State**

01-12-2000 90060 021 \*\*\*\*70.00

Principal Place of Business      Mailing Address  
3565 CYPRESS TERRACE NORTH      3565 CYPRESS TERRACE NORTH  
PINELLAS PARK FL 33781      PINELLAS PARK FL 33781-2739  
US      US

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3197837

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

OLIVIER, LORI  
2565 CYPRESS TERRACE NORTH  
PINELLAS PARK FL 33781

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 GRAY, DEBRA  
STREET ADDRESS 3565 CYPRESS TERR. NORTH  
CITY-ST-ZIP PINELLAS PARK FL 34665

TITLE President ☒ Change ☒ Addition  
NAME Howard Calhoun  
STREET ADDRESS 888 62nd AVE. N  
CITY-ST-ZIP St. Pete, FL 33702

TITLE VPD ☒ Delete  
NAME KEISER, TOM  
STREET ADDRESS 7324 58TH WAY NO  
CITY-ST-ZIP ST-PETE FL

TITLE VP ☒ Change ☒ Addition  
NAME Joe Raetano  
STREET ADDRESS 600 Cleveland St.  
CITY-ST-ZIP Clearwater, FL 33755

TITLE STD ☒ Delete  
NAME CANTRELL, LARRY  
STREET ADDRESS 3565 CYPRESS TERR. NORTH  
CITY-ST-ZIP PINELLAS PARK FL 34665

TITLE Lisa Fuenell STD ☒ Change ☒ Addition  
NAME 710 Carillon PKWAY  
STREET ADDRESS St. Petersburg, FL 33716  
CITY-ST-ZIP

TITLE ED ☐ Delete  
NAME OLIVIER, LORI  
STREET ADDRESS 3565 CYPRESS TERR. NORTH  
CITY-ST-ZIP PINELLAS PARK FL 34665

TITLE Robert Vander Laan D ☐ Change ☒ Addition  
NAME 2706 US HWY 19  
STREET ADDRESS Palm Harbor, FL 34683  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Debra GRAY D ☒ Change ☐ Addition  
NAME 334 51 US Hwy 19  
STREET ADDRESS Palm Harbor, FL 34684  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: *Lori Oliver* SIGNATURE REQUIRED *Oliver*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/4/00 727-528-4663

CR2E037 (9/99)