## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **N9400003197**

1. Entity Name

SERASTIAN ATHIRTICS ROOSTER ASSOCIATION INC

JEDAJ	IIMIY AIDI	LETICS BOOSTEN	MJJUUIF	ATION, INC.		5/		06-19-2002 90456	038 ***46	51.25	
Principal Pla	ce of Busines	ss	Mailin	ng Address			-				
1327 N. CENTRAL AVENUE SEBASTIAN FL 32958			SEBAS	1327 N. CENTRAL AVENUE SEBASTIAN FL 32958							
		<b>~</b> 3	ct				 	11 <b>210</b> 12 <b>00</b> 171 <b>00</b> 111 <b>00</b> 111 <b>00</b> 111	I BRÁID (BADA AIDEAN A	E#)( #88) (88#	
	Place of Busi	ness	3. Mai	ailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.				DO NOT WRITE IN THI	S SPACE		
City & State			Cit	City & State			4. FEI Number Applied For Not Applied For Not Applied Por				
Zip . Country		Zip		Country		5. Certificate of Sta		\$8.75 Ac			
	6. Name	and Address of Curren	nt Registere	ed Agent			7. Name and Addi	ress of New Registered	Fee Require	ed	
					Name	_	_		<del></del>		
VANDEVOORDE, RENE G					Street /	Street Address (P.O. Box Number is Not Acceptable)					
1327 N. CENTRAL AVENUE											
SEBASTIAN FL 32958					City	F1F4.44.			■ Zip Coo	de .	
		ty submits this statement t						F	L   Zip ook		
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.	LOCTO	OFFICERS AND D	IRECTORS		11.	1	ADDITIONS/CHANGE	S TO OFFICERS AND D	DIRECTORS IN	N 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1327 N. C	orde, rène g Entral avenue N FL 32958		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DONINI, A 1331 N CI	NTHONY M ENTRAL AVENUE N FL 32958		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME · • STREET ADDRESS CITY-ST-ZIP	D HINES, RA 12524 RO	NDY	~ • 4	☐ Delete	TITLENAMESTREET ADDRESSCITY-ST-ZIP	j.			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		AAAA		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	130 130	85 77#	STHY FL 3295	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Do	, , , , , , , , , , , , , , , , , , ,		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	
TITLE NAME STREET ADDRESS				☐ Delete	TITLE NAME STREET ADDRESS				☐ Change	Addition	

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:

\*\*The control of the corporation of 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 the corporation of the corporation of 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 the corporation of the corporation of 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 the corporation of the receiver or trustee empowered.

\*\*The corporation of 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 the corporation of the corporation of 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 the corporation of 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 the corporation of the receiver of the r

CITY-ST-ZIP

**SIGNATURE:** 

772-589-4353

**FILED** 

Jun 19, 2002 8:00 am Secretary of State