

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

17.

01-21-2003 90533 003 ****61.25

DOCUMENT # N94000004162

1. Entity Name

GATOR ATTACK CLUB, INC.



Principal Place of Business

**5415 NW 54 DRIVE
GAINESVILLE FL 32653
US**

Mailing Address

**P.O. BOX 142464
GAINESVILLE FL 32614
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 **59-3164848**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TREPANIER, DOROTHY
5415 NW 54TH DRIVE
GAINESVILLE FL 32653**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PARRISH, BETTY 156 TURKEY CREEK ALACHUA FL 32615	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T POPP, RUTHIE JO 3424 NW 110TH TERRACE GAINESVILLE FL 32606	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VARNER, RICK 6007 NW 33RD ST GAINESVILLE FL 32653	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HAYES-CHRISTIANSEN, CAROL 3725 SW 3RD PL GAINESVILLE FL 32607	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President D same	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	same D 2324 SW 95th Terrace Gainesville, FL 32607-3241	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Past President same	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary D Janet Garrett P.O. Box 488 Earleton, FL 32631-0488	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Elect Bob McIver 14506 NW 20th Terrace High Springs, FL 32643	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)