

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90062 022 ****61.25

DOCUMENT # N94000004999

1. Entity Name

THE BRANDON SERTOMA CLUB, INC.

Principal Place of Business

P.O. BOX 3961
 BRANDON FL 33509
 US

Mailing Address

P.O. BOX 3961
 BRANDON FL 33509
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3267240

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

WITTE, TIM
103 W MORGAN
BRANDON FL 33510

7. Name and Address of New Registered Agent

Name **ROBERT W. OWENS JR**
 Street Address (P.O. Box Number is Not Acceptable)
2222 WILLOWOOD HOLLOW DR.
 City **VALRICO** FL Zip Code **33594**

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 **ROBERT W. OWENS JR**

Signature, typed or printed name of registered agent and title if applicable.

Robert W Owens Jr

(NOTE: Registered Agent signature required when reinstating)

1/24/01
 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUNNAM, PERCY 1924 SYDNEY RD VALRICO FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERNANDEZ, JESSEE 1309 ESTATEWOOD DR BRANDON FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILSON, TOM 1805 TAMERLANE PL BRANDON FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROBERTS, NORMAN 2209 LUMSDEN RD VALRICO FL 33594	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WITTE, TIM 103 W MORGAN BRANDON FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRIDGES, PHYLLIS 10906 REAL SHORT ROAD THONOTOSASSA FL 33592	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROBERT W. OWENS JR <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2222 WILLOWOOD HOLLOW DR VALRICO FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHRISTOPHER, BEN <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 506 ROSIER BRANDON, FL 33510
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WITTE, TIM <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 103 W. MORGAN BRANDON FL 33510
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

Robert W Owens Jr
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/24/01 **813-684-5548**

CR2E037 (10/00)