💉 2001 UNIFORM BUSINESS REPORT (UBR)🛰

DOCUMENT # N9500000085

1. Entity Name

THE GREATER PENSACOLA JUNIOR GOLF ASSOCIATION, I

101 WEST MAIN ST

Principal Place of Business

Mailing Address

P.O. BOX 12303

PENSACOLA FL 32582 US 2. Principal Place of Business		PENSACOLA FL 32581-2303 US 3. Mailing Address								
										Suite, Apt. #, etc.
City & State		City & State			4. FEI Numbe	59-3288799			oplied For ot Applicable	
Zip Country		Zip	Zip Country		5. Certificate of Status Desired \$8.75 Additional Fee Required					
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New Ro	egistered A	gent		
· · · · · · · · · · · · · · · · · · ·	a Tipo (1881) in the feet , in the second		Na	me						
FEDOWIC	CH, BILL ODDRUM CT		Street Address			s (P.O. Box Number is Not Acceptable)				
	OLA FL 32514		Cit	у			FL	Zip Code	9	
				•			ГЬ			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	E: Registered Agen	t signature require	d when reinstating)		DATE	·		
	FILE NOW: FEE IS \$61.25	9. Election Campaign Trust Fund Contrib		\$5.0 Adde	00 May Be d to Fees		Check Poartment	ayable to of State		
10.	OFFICERS AND DI	RECTORS	11.		ADDITIONS/CHA	NGES TO OFFICE	RS AND DIR	ECTORS IN	10	
TITLE	D	Delete	TITLE					☐ Change	☐ Addition	
NAME	ROUSEG, BUD		NAME							
STREET ADDRESS	COVE DRWING RANGE BLVD		STREET ADD	t						
CITY-ST-ZIP	PENSACOLA FL 32507		, CITY-ST-ZI	[*]						
TITLE	DP	☐ Delete	TITLE					☐ Change	☐ Addition	
NAME STREET ADDRESS	FEDOWICH, WILLIAM J JR 9225 WOODRUN COURT		NAME STREET ADD	RESS						
CITY-ST-ZIP	PENSACOLA FL	p	CITY-ST-ZI							
TITLE	DV	☐ Delete	TITLE	DV				Change	Addition	
NAME	BOBO, STEVE		NAME	BOB	E, STEVE	-				
STREET ADDRESS	7140 BAHAMA RD.		STREET ADD	RESS 714	O BAHA	MA ROAD)			
CITY-ST-ZIP	PENSACOLA FL 32514		CITY-ST-Z	PE	NSA-COL	MA ROAD A. FL 3.	2514			
TITLE	D	Delete	TITLE	1 -	AM COO			☐ Change	Addition	
NAME	COOK, MARK		NAME	HIR	AM COO	K Estane I	2			
STREET ADDRESS	3113 CABBLESTONE		STREET ADD							
CITY-ST-ZIP	MILTON FL 32571	<i>~</i>	CITY-ST-ZI	CA	CE; +L	3257 ANN MISH 172	<u> </u>		Addition	
TITLE	S MAHANEY VICKI	Delete	TITLE NAME	1114	TSON. JO	ANIN		Change	Addition (A)	
NAME STREET ADDRESS	MAHANEY, VICKI 1161 LIONSGATE LANE		STREET ADD	RESS LA	SS SOA	WISH TR	AIL H	C-4		
CITY-ST-ZIP	GULF BREEZE FL 32561		CITY-ST-ZI	PER	VSACOLA	, FC 3as	04	•		
TITLE	T	Delete	TITLE			, . <u> </u>	 	Change	Addition	
NAME	DORSEY, GAIL		NAME						_	
STREET ADDRESS	1433 PLAYERS CLUB CIRCLE		STREET ADD	RESS						
CITY_ST_7IP	CHIE PRESE EL 20ECT		CiTY-ST-7I	p						

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:

1/28/01

850.932.2643

FILED

03-19-2001 90028 012 ****61.25

Mar 19, 2001 8:00 am Secretary of State