

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000002891

1. Entity Name

APOLLO BEACH TRACK CLUB, INC.

FILED
Jul 25, 2000 8:00 am
Secretary of State

07-25-2000 90006 033 ****61.25

Principal Place of Business

413 FLAMINGO DRIVE
APOLLO BEACH FL 33572

Mailing Address

413 FLAMINGO DRIVE
APOLLO BEACH FL 33572

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

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BUCHANAN, JUDY
413 FLAMINGO DRIVE
APOLLO BEACH FL 33572

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.

SIGNATURE

Judy D Buchanan Judy D Buchanan President

7/18/00

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

After September 13, 2000 min. will be \$236.25

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 P
NAME BUCHANAN, MARK
STREET ADDRESS 413 FLAMINGO DRIVE
CITY-ST-ZIP APOLLO BEACH FL 33572 ☐ Delete

TITLE V
NAME BUCHANAN, JUDY
STREET ADDRESS 413 FLAMINGO DRIVE
CITY-ST-ZIP APOLLO BEACH FL 33572 ☐ Delete

TITLE D
NAME MOFFENBIER, LINDA
STREET ADDRESS 12920 LONG CREST DRIVE
CITY-ST-ZIP RIVERVIEW FL ☐ Delete

TITLE D
NAME BELEZ, AIKANE
STREET ADDRESS 413 FLAMINGO DRIVE
CITY-ST-ZIP APOLLO BEACH FL ☐ Delete

TITLE TR
NAME LYNCH, KAREN
STREET ADDRESS 3006 MFL CIR CL
CITY-ST-ZIP APOLLO BEACH FL ☐ Delete

TITLE TR
NAME BAKER, BAKER
STREET ADDRESS 6233 FL CIR WEST
CITY-ST-ZIP TAMPA FL ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME Buchanan, mark
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☒ Change ☐ Addition
NAME Buchanan, Judy
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME BAKER, Theresa
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:

Judy D Buchanan JUDY D BUCHANAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/18/00

813 645-1188

Date

Daytime Phone #

CR 11 037 (5/00)