

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000003903

1. Entity Name

ROYALE REGIMENT BAND BOOSTERS, INC.

Principal Place of Business

200 EAST KELLY ST.
BROOKSVILLE FL 34601

Mailing Address

P.O. BOX 10554
BROOKSVILLE FL 34603-0554

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Hernando

Zip

Country

4. FEI Number

59-3324036

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Michelle Gregory

Street Address (P.O. Box Number is Not Acceptable)

545 East Ave

City

Brooksville

FL

Zip Code

34601

DOOLEY, MICHAEL
26469 RICHBARN ROAD
BROOKSVILLE FL 34601

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/23/01

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 PD
NAME FLASPETER, RUTH
STREET ADDRESS 3281 BATTEN RD.
CITY-ST-ZIP BROOKSVILLE FL 34602 ☒ Delete

TITLE VD
NAME CLARK, MARJORIE
STREET ADDRESS 6392 HILTON DR
CITY-ST-ZIP BROOKSVILLE FL 34601 ☒ Delete

TITLE SD
NAME BARRADAS, MARY
STREET ADDRESS 31255 LANCEWOOD DR
CITY-ST-ZIP BROOKSVILLE FL ☒ Delete

TITLE TD
NAME LEKO, JANET
STREET ADDRESS 26382 RICHBARN RD
CITY-ST-ZIP BROOKSVILLE FL 34601 ☒ 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 President
NAME Michelle Gregory
STREET ADDRESS 545 East Ave.
CITY-ST-ZIP Brooksville, FL 34601 ☒ Change ☒ Addition

TITLE V.P.
NAME Virginia Clayton
STREET ADDRESS 18102 Benes Roush
CITY-ST-ZIP Masaryktown, FL 34609 ☒ Change ☒ Addition

TITLE Sect.
NAME Donna Mantucci
STREET ADDRESS 7105 Lexington Dr.
CITY-ST-ZIP Brooksville, FL 34602 ☒ Change ☒ Addition

TITLE Treas.
NAME John Ehlenbeck
STREET ADDRESS 23245 Croom Rd.
CITY-ST-ZIP Brooksville, FL 34601 ☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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:

John E. Ehlenbeck

John E.

Ehlenbeck

4/23/01 352-596-8864

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 90260 001 ****61.25
05-17-2001 90260 002 *****8.75



DO NOT WRITE IN THIS SPACE

0079482

CR2E037 (10/00)