

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000004197

1. Entity Name

COUNTRYSIDE TOUCHDOWN CLUB, INC.

FILED
Jun 05, 2000 8:00 am
Secretary of State

06-05-2000 90037 006 ****61.25

Principal Place of Business

Mailing Address

COUNTRYSIDE HIGH SCHOOL
3000 SR 580
CLEARWATER FL 33761
US

COUNTRYSIDE TOUCHDOWN CLUB
PO BOX 15225
CLEARWATER FL 33766-5225
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

NOT APPLICABLE

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

VERNON, LAMAR
2020 HEATHER CT
CLEARWATER FL 33761

Name

JOHN C. BANCROFT

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

2145 MORNINGSIDE DR.

City

SAFETY HARBOR

FL

Zip Code

34695

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

John C. Bancroft

Signature typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

5-27-00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME VERNON, LAMAR
STREET ADDRESS 2020 HEATHER CT
CITY-ST-ZIP CLEARWATER FL 33761

TITLE PD ☒ Change ☐ Addition
NAME JOHN C. BANCROFT
STREET ADDRESS 2145 MORNINGSIDE DR.
CITY-ST-ZIP SAFETY HARBOR, FL. 34695

TITLE VD ☐ Delete
NAME STEVENSON, JOE
STREET ADDRESS 2744 MESLIN WAY
CITY-ST-ZIP CLEARWATER FL 33761

TITLE VD ☒ Change ☐ Addition
NAME CINDY REARDON
STREET ADDRESS 2692 ENTERPRISE RD. E.
CITY-ST-ZIP CLEARWATER, FL. 34695

TITLE SD ☐ Delete
NAME REARDON, CINDY
STREET ADDRESS 2692 ENTERPRISE RD E
CITY-ST-ZIP CLEARWATER FL 33759

TITLE VD ☒ Change ☐ Addition
NAME JESSICA DEWOLF
STREET ADDRESS 3201 SANDY RIDGE DR.
CITY-ST-ZIP CLEARWATER, FL. 33761

TITLE TD ☐ Delete
NAME BANCROFT, JOHN
STREET ADDRESS 2145 MORNINGSIDE DR
CITY-ST-ZIP SAFETY HARBOR FL 34695

TITLE SD ☒ Change ☐ Addition
NAME KATHY SHIBA
STREET ADDRESS 2668 McMULLEN BOOTH RD. #1328
CITY-ST-ZIP CLEARWATER FL. 34695

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☒ Change ☒ Addition
NAME PAT VERNON
STREET ADDRESS 2020 HEATHER CT.
CITY-ST-ZIP CLEARWATER, FL. 33761

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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:

John C. Bancroft
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN C. BANCROFT 5-27-00 727-725-1170

Date

Daytime Phone #

CR2E037 (2/95)