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344-5726

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Mar 31, 2002 8:00 am secretary of State DOCUMENT # N96000002685 1. Entity Name 03-31-2002 90331 033 ****61.25 PYCC COUNCIL, INC. Principal Place of Business Mailing Address 6250 KIPPS COLONY CT 6 PARADISE LANE SAINT PETERSBURG FL 33706 #305 **GULFPORT FL 33707** US Annahransa F. K. St. 2. Principal Place of Business 3. Maili Andrew J. Gill-22PIPASADENA 5950 Pelican Bay Plaza Suite, Apt! #, etc. DO NOT WRITE IN THIS SPACE Suite 1101A Gulfport, Fl. -33707 4. FEI Number Applied For 59-3382970 Not Applicable Zip Country \$8.75 Additional 33707 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) BACON, DAVID A 2959 1ST AVENUE NORTH SAINT PETERSBURG FL 33713-0682 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 Signature, typed or printed name of registered agent and title if applicable (NQTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. (9/01) Delete ☐ Change TITLE TITLE SARY PERONI 22 DI PASADENA PLACE LINDHOHN, CARL NAME NAME STREET ADDRESS STREET ADDRESS 6250 KIPPS COLONY CT GULF PORT CITY-ST-ZIP CITY-ST-ZIP **GULFPORT FL 33707** Delete TITLE TITLE Andrew J. Gill NAME NICKLAUS, BEVERLEY N NAME 5950 Pelican Bay Plaza STREET ADDRESS STREET ADDRESS 6 PARADISE LANE Suite 1101A CITY-ST-ZIP SAINT PETERSBURG FL 33706 CITY-ST-ZIP Gulfport, Fl. 33707 ☐ Delete TITLE Change Addition Campbell, Claudia NAME NAME STREET ADDRESS STREET ADDRESS 7930 SUN ISLAND S #304 CITY-ST-ZIP CITY-ST-ZIP SAINT PETERSBURG FL 33706 TITLE ☐ Delete TITLE ☐ Change ■ Addition **KEATING, EDMUND** NAME NAME STREET ADDRESS 6228 PASADENA PT BLVD STREET ADDRESS CITY-ST-7IP **GULFPORT FL 33707** D HARRY AVICHLAND Delete TITLE TITLE OLUVIC, MARK NAME STREET ADDRESS 6240 KIPPS COLONY CT STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **GULFPORT FL 33707** TITLE .:.. ☐ Addition ☐ Delete TITLE ☐ Change NÀME ₹ KAPPOS, GEORGE NAME STREET ADDRESS 5940 PELICAN BAY PLAZA, #702B STREET ADDRESS CITY-ST-ZIP GULFPORT FL 33707 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.