

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90087 010 ****61.25

DOCUMENT # N96000006588

1. Entity Name

SPACE COAST FIGURE SKATING CLUB, INC.

Principal Place of Business

**720 ROY WALL BLVD.
 ROCKLEDGE FL 32955**

Mailing Address

**720 ROY WALL BLVD.
 ROCKLEDGE FL 32955**

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 **59-3436284**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**EATON, DENNIS
 3817 WETHERS FIELD CIRCLE
 TITUSVILLE FL 32780**

7. Name and Address of New Registered Agent

Name **Eaton, Dennis**
 Street Address (P.O. Box Number is Not Acceptable)
1362 Dewey CT
Rockledge, FL
 City **FL** Zip Code **32955**

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

Dennis Eaton **DENNIS EATON**

4/22/02

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

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 **SPINNEWEBER, HEATHER** ☐ Delete
 STREET ADDRESS **975 SABAL GROVE DR.**
 CITY-ST-ZIP **ROCKLEDGE FL 32955**

TITLE **VPD**
 NAME **WARD, VERONICA** ☐ Delete
 STREET ADDRESS **2115 ROYAL OAKS DR.**
 CITY-ST-ZIP **ROCKLEDGE FL 32955**

TITLE **SD**
 NAME **MCCLURE, CHARLOTTE** ☐ Delete
 STREET ADDRESS **1836 SUN GAZER DR.**
 CITY-ST-ZIP **VIERA FL 32955**

TITLE **TD**
 NAME **VARCHAL, CAROLE** ☐ Delete
 STREET ADDRESS **1525 N HWY A1A #502**
 CITY-ST-ZIP **INDIALANTIC FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
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 NAME
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 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:

Carole Varchal **Carole Varchal** **4-22-02 321-984-2630**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)