

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 06, 2001 8:00 am**  
**Secretary of State**

02-06-2001 90308 003 \*\*\*\*61.25

**DOCUMENT # N97000000248**

1. Entity Name

**DANSVILLE NEIGHBORHOOD DEVELOPMENT CORPORATION**

Principal Place of Business

**1806 LOMBARDY DRIVE  
 CLEARWATER FL 33755**

Mailing Address

**1806 LOMBARDY DRIVE  
 CLEARWATER FL 33755**

2. Principal Place of Business

**12603 132nd AVENUE**

Suite, Apt. #, etc.

3. Mailing Address

**12603 132nd AVENUE**

Suite, Apt. #, etc.

City & State

**LARGO, FLORIDA**

Zip

**33774**

Country

**USA**

City & State

**LARGO, FLORIDA**

Zip

**33774**

Country

**USA**

4. FEI Number

**59-3456699**

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**ROBINSON, E J  
 1806 LOMBARDY DRIVE  
 CLEARWATER FL 34615**

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

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 NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>REED, CHERYL COLLER</b> <b>14 S FORT HARRISON AVE SUITE 3050</b> <b>CLEARWATER FL 33756</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>THOMAS, WILLIE J SR.</b> <b>12888 - 127TH STREET, NORTH</b> <b>LARGO FL 33774</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CAMPBELL, SONJIA</b> <b>12888 - 127TH STREET, NORTH</b> <b>LARGO FL 33774</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>JAMISON, SHIRLEY</b> <b>3155 ADRIAN AVE APT B</b> <b>LARGO FL 33774</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BALWIN, DAVID</b> <b>12632 134TH AVE NO</b> <b>LARGO FL 33774</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CAMPBELL, BERNICE</b> <b>12852 127TH ST NO</b> <b>LARGO FL 33774</b>	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Reed, Cheryl Coller</b> <b>600 Cleveland St. Suite #800</b> <b>Clearwater, FL 33755</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Jamison, Shirley</b> <b>12758 134th Avenue</b> <b>Largo, FL 33774</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: **E. J. Robinson**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1-31-01 (727) 442-4155**

Date

Daytime Phone #

CR2E037 (10/00)

DANSVILLE NEIGHBORHOOD DEVELOPMENT CORPORATION

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Phone/Fax (727) 595-6568  
Hours: 8:30-5:30 M-F

#N 97248

12603 132nd Ave  
Largo, FL 33774

Attachment to 2001 Uniform Business Report

Continued Officers and Directors from #10

Title: D  
Name: Ms. Diane Haynes  
Street Address: 12932 126<sup>th</sup> Street North  
City-ST-Zip: Largo, FL 33774-2625

Title: D  
Name: Victor Lucas  
Street Address: 1333 Feather Sound Drive #A404  
City-ST-Zip: Clearwater, FL 33762

Title: D  
Name: Clarence Hulse  
Street Address: 2311 Mary Sue Street  
City-ST-Zip: Largo, FL 33774

Title: D  
Name: Ms. Mary Dixon  
Street Address: 1752 Taylor Lake Place  
City-ST-Zip: Largo, FL 33778-1006

Title: D  
Name: Glenn A. Claytor  
Street Address: 12603 132<sup>nd</sup> Avenue  
City-ST-Zip: Largo, FL 33774

Title: D  
Name: Vernon Bryant  
Street Address: Pinellas County Cooperative Extension Service  
12175 125<sup>th</sup> Street North  
City-ST-Zip: Largo, FL 33778

Title: D  
Name: Ken Rollins  
Street Address: Gulf Coast Museum of Art  
12211 Walsingham Road  
City-ST-Zip: Largo, FL 33778