2000 UNIFORM BUSINESS REPORT (UBR) FILED Jun 07, 2000 8:00 am DOCUMENT # N97000000962 Secretary of State 1. Entity Name PENSACOLA GREYHOUND ASSOCIATION, INC. 05-03-2000 90089 036 ****61.25 Principal Place of Business Mailing Address 10307 TANTON RD -10307 TANTON RD PENSACOLA FL 32506-9584 PENSACOLA FL 32506-9584 2. Principal Place of Business 3. Mailing Address 32414 Clantol Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For 59-3421513 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ETHEREDGE, WINSTON R -10307 TANTON RD 3 PENSACOLA FL 32506-9584 City PASAIOLG 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 Stonature, typed or printed afficeLregistered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Delete TITLE Change ☐ Addition NAME NAME WINSTON R ETHEREDGE STREET ADDRESS STREET ADDRESS 10307 TANTON RD bog track Kd CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32506 Delete TITLE TITLE VAVAZO, SAVA NAME NAME Tantor ud Tantor ud , Fla 3000 STREET ADDRESS STREET ADDRESS 8346 TABAID LN CITY-ST-ZIP CITY-ST-7IP PENSACOLA FL 32506 Delete TITLE ☐ Change ☐ Addition DVPS TITLE pensacola, DANNY VILES NAME NAME STREET ADDRESS STREET ADDRESS 32424 BARTEL ST CITY-ST-ZIP CITY-ST-ZIP **ELBERTA AL 36530** ΓN Change ☐ Addition TITI E TITLÈ ☐ Delete penny lotheril NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-78 Change ☐ Addition TIME ☐ Delete TITI F NAME NAME STREET ADDRESS 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 a raddyess, with all other like empowered. SIGNATURE: