

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 90714 036 ****61.25

DOCUMENT # N97000002692

1. Entity Name

**SUN STATE WING AND ROTOR CLUB, INC. E.A.A. CHAPT
 ER 1192**

Principal Place of Business

Mailing Address

953 LAKEVIEW DR
 N FT MYERS FL 33903

953 LAKEVIEW DR
 N FT MYERS FL 33903



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21971 N. RIVER RD.

3. Mailing Address

21971 N. RIVER RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ALVA FL.

City & State

ALVA FL.

Zip

33920

Country

Lee

Zip

33920

Country

Lee

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

O'NEAL, HOMER J
 953 LAKEVIEW DR
 N FT MYERS FL 33903

7. Name and Address of New Registered Agent

Name Richard L. Oxnam

Street Address (P.O. Box Number is Not Acceptable)
21971 N. RIVER RD.

City

ALVA

FL

Zip Code

33920

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

Richard L. Oxnam

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

5-1-02

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 ☒ Delete
 NAME O'NEAL, HOMER J
 STREET ADDRESS 953 LAKEVIEW DR
 CITY-ST-ZIP N FT MYERS FL 33903

TITLE VD ☒ Delete
 NAME MCNEAR, PATRICK
 STREET ADDRESS %953 LAKEVIEW DR
 CITY-ST-ZIP N FT MYERS FL 33903

TITLE SD ☒ Delete
 NAME OXNAM, MARY JANE
 STREET ADDRESS %953 LAKEVIEW DR
 CITY-ST-ZIP N FT MYERS FL 33903

TITLE TD ☒ Delete
 NAME OXNAM, RICHARD
 STREET ADDRESS %953 LAKEVIEW DR
 CITY-ST-ZIP N FT MYERS FL 33903

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 PD ☒ Change ☐ Addition
 NAME RICHARD L. OXNAM
 STREET ADDRESS 21971 N. RIVER RD.
 CITY-ST-ZIP ALVA FL. 33920

TITLE VD ☒ Change ☐ Addition
 NAME TERRY WELLES
 STREET ADDRESS 745 HWY. 155. %21971 N. RIVER RD
 CITY-ST-ZIP ALVA FL. 33920

TITLE SD ☒ Change ☐ Addition
 NAME SUE WELLES
 STREET ADDRESS %21971 N. RIVER RD.
 CITY-ST-ZIP ALVA FL. 33920

TITLE TD ☒ Change ☐ Addition
 NAME MARY JANE OXNAM
 STREET ADDRESS %21971 N. RIVER RD.
 CITY-ST-ZIP ALVA FL. 33920

TITLE ☐ Change ☐ Addition
 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:

Richard L. Oxnam

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-02

Date

941-728-3774

Daytime Phone #

CR2E037 (9/01)