

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 22, 2001 8:00 am
Secretary of State

0076413

DOCUMENT # N97000005168

1. Entity Name

RIVERVIEW WRESTLING BOOSTERS CLUB, INC.

LA

06-22-2001 90002 049 ****61.25

Principal Place of Business

~~4136 WAKE AVE~~
 SARASOTA FL 34241
 US

Mailing Address

4136 WAKE AVE
 SARASOTA FL 34241
 US

2. Principal Place of Business

7059 Saddle Creek Lane
 Suite, Apt. #, etc.

3. Mailing Address

7059 Saddle Creek Lane
 Suite, Apt. #, etc.

City & State

Sarasota FL

City & State

Sarasota, FL

4. FEI Number

65-0792842

Applied For

Not Applicable

Zip

34241

Country

Sarasota

Zip

34241

Country

Sarasota

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MCCLLENATHEN, CHAD M ESQ
~~2033 MAIN STREET~~
~~STE 400~~
 SARASOTA FL 34237

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1820 Ringling Blvd

City

Sarasota

FL

Zip Code

34236

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

6/13/01

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	PD MCCLLENATHEN; MCCLLENATHEN, CHAD M 2033 MAIN ST STE 400 1820 Ringling Blvd SARASOTA FL 34237	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, V-P BERKERY, LARRY 4938 HUBNER CT SARASOTA FL 34241	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCIVER, PAUL 7338 BEE RIDGE RD SARASOTA FL 34241	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAY, STEVE 7436 MYRICK DR SARASOTA FL 34241	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BUNTING, LAURIE 2536 RIVERVIEW CT SARASOTA FL 34231	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HANS, BILL 5117 TIMBER CHASE WAY SARASOTA FL 34238	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	ELLIS, CALVIN 4136 WAKE AVE SARASOTA, FL 34241	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ELLIS, KELLY 4136 WAKE AVE SARASOTA, FL 34241	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Roger Ierardi 1941 Baywood Ct Sarasota, FL 34231	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Terry Law 4371 Kingston Loop Sarasota, FL 34238	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D.T. Donna Garsy 4024 Red Rock Lane Sarasota, FL 34231	<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

SIGNATURE REQUIRED

2/7/01 (941) 926-7762

CR2E037 (10/00)