

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000006100

1. Entity Name

GERMAN-AMERICAN BUSINESS COUNCIL OF TAMPA BAY, I
NC.

Principal Place of Business

Mailing Address

ONE BEACH DRIVE SE STE 220
ST. PETERSBURG FL 33701

ONE BEACH DRIVE SE STE 220
ST. PETERSBURG FL 33701

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

59-3479089

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JACOBSON, RICHARD A
501 E KENNEDY BLVD, SUITE 1700
TAMPA FL 33602

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME HAUSNER, BARBARA
STREET ADDRESS 2042 DIAMOND CT.
CITY-ST-ZIP OLDSMAR FL 34677 ☐ Delete

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

TITLE D
NAME BIERLEY, JOHN C
STREET ADDRESS 5414 LYKES LANE
CITY-ST-ZIP TAMPA FL 33611 ☐ Delete

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

TITLE T
NAME ROBERGE, THOMAS
STREET ADDRESS 1 BEACH DR SE SUITE 220
CITY-ST-ZIP SAINT PETERSBURG FL 33701 ☐ Delete

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

TITLE VP
NAME MCFARLAND, JOSEPH B
STREET ADDRESS 2311 MORRISON AVE, UNIT #7
CITY-ST-ZIP TAMPA FL 33629 ☒ Delete

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

TITLE D
NAME FLYNN, WILLIAM J III
STREET ADDRESS 2534 ANDERSON DR. W.
CITY-ST-ZIP CLEARWATER FL 34621 ☐ Delete

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

TITLE D
NAME LANGER, PETER
STREET ADDRESS 334 E. LAKE RD. #288
CITY-ST-ZIP PALM HARBOR FL 34685 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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 THOMAS ROBERGE, TREAS 1/7/02 727 822 9393

FILED
Jan 09, 2002 8:00 am
Secretary of State

01-09-2002 90017 014 ****61.25

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DO NOT WRITE IN THIS SPACE

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CR02037 (9/01)