2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000000117

1. Entity Name

TARPON TIP-OFF CLUB, INC.

FILED
01 DEC -3 PM 4:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
TARPON HIGH SCHOOL 1411 GULF ROAD TARPON SPRINGS FL 34689	

2. Principal Place of Business	3. Mailing Address
3116 LUDLOW DR.	1411 GULF ROAD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: NEW PORT RICHEY FL	City & State: TARPON SPRINGS FL
Zip: 34655 Country: PASCO	Zip: 34689 Country: Pinellas

DO NOT WRITE IN THIS SPACE

4. FEI Number: 593556671 ☐ 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
SHARI FORTNER-JOHNSON 3116 LUDLOW DRIVE NEW PORT RICHEY FL 34655	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: Shari Fortner-Johnson 11/28/01
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P-D GENO ALLEN 1937 SKYLAND DRIVE CLEARWATER FL 34619	☒ Delete	P-D SHARI FORTNER-JOHNSON 3116 LUDLOW DR NEW PORT RICHEY FL 34655	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T-D ELEANOR R HANES 800-D Glenmore CT Palm Harbor FL 34684	☐ Delete	600004721306--5 -12/12/01--01080--027 *****61.25 *****61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JERRY WOODKA 1411 GULF ROAD TARPON SPRINGS FL 34689	☒ Delete	D LESLIE KING 9131 COLLAGE LN PORT RICHEY FL 34668	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JUDITH SCHEWE 8900 SHARON DRIVE NEW PORT RICHEY FL 34654	☒ Delete	D MARIE DRAKE 1411 GULF ROAD TARPON SPRINGS FL 34689	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (11/00)

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: Shari Fortner-Johnson 11/28/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #