

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000002029

1. Entity Name

B/A SOCIAL CLUB, INC.

Principal Place of Business

18675 US HWY 19 NORTH  
CLEARWATER FL 33764

Mailing Address

18675 US HWY 19 NORTH  
CLEARWATER FL 33764

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

59-3558960

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

TEEVAN, RONALD P  
200 N GARDEN AVE, SUITE A  
CLEARWATER FL 33755

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 DP  
NAME PITZ, MARY JANE ☐ Delete  
STREET ADDRESS 18675 US HWY. 19 NORTH, #250  
CITY-ST-ZIP CLEARWATER FL 33764

TITLE Director ☒ Change ☐ Addition  
NAME Pit, Mary Jane  
STREET ADDRESS 18675 US Hwy 19N #250  
CITY-ST-ZIP Clearwater, FL 33764

TITLE D ☒ Delete  
NAME LA PORTS, SHIRLEY  
STREET ADDRESS 18675 US HWY 19N #103  
CITY-ST-ZIP CLEARWATER FL 33764

TITLE D Chm ☐ Change ☒ Addition  
NAME Stewart, Ray  
STREET ADDRESS 18675 US Hwy 19N #372  
CITY-ST-ZIP Clearwater FL 33764

TITLE SD ☐ Delete  
NAME THRESS, MARGARET  
STREET ADDRESS 18675 US HWY. 19 NORTH, #449  
CITY-ST-ZIP CLEARWATER FL 33764

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

TITLE TD ☐ Delete  
NAME THIEL, BARBARA  
STREET ADDRESS 18675 US HWY. 19 NORTH, #407  
CITY-ST-ZIP CLEARWATER FL 33764

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

TITLE D ☐ Delete  
NAME WHITE, FRED  
STREET ADDRESS 18675 US HWY 19 NORTH #408  
CITY-ST-ZIP CLEARWATER FL 33764

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

TITLE ☐ Delete  
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: *Mary Jane Pitz*  
SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/10/02 727-539-0929



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)