

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000003453

1. Entity Name

SOLUTIA EMPLOYEES RECREATION ASSOCIATION, INCORP



Principal Place of Business

Mailing Address

3000 OLD CHEMSTRAND ROAD
GONZALEZ FL

P.O. BOX 97
GONZALEZ FL 32560

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

~~50-2810132~~
59-0976782

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

DEAN, ELTON
3000 OLD CHEMSTRAND ROAD
GONZALEZ FL

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

TITLE S **LENORA** ☐ Delete
NAME SCRUGGS, LENDRA
STREET ADDRESS 5550 SHADOW GROVE
CITY-ST-ZIP PENSACOLA FL 32514

TITLE TD ☐ Delete
NAME FDEAN, ELTON
STREET ADDRESS 761 PINEY LN
CITY-ST-ZIP CANTONMENT FL 32533

TITLE D ☐ Delete
NAME DREYER, GARY
STREET ADDRESS 3262 WIGGINS LN
CITY-ST-ZIP CANTONMENT FL 32533

TITLE PD ☐ Delete
NAME SKIRIUS, STEVE
STREET ADDRESS 10811 SHADOW CREEK
CITY-ST-ZIP PENSACOLA FL 32514

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

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

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

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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:

SIGNATURE REQUIRED

FILED
Jun 14, 2001 8:00 am
Secretary of State

06-14-2001 90006 035 ****61.25

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DO NOT WRITE IN THIS SPACE

6/6/01 334
950-1716

Attachment Document # 298000003453

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is due in
2001.

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DR-15EZ
R. 01/01

Florida Department of Revenue
Sales and Use Tax Return

T

Certificate Number

27-00-021247-57-3 FEB 2001

Collection Period

FEB 2001

Location Address

3000 OLD CHEMSTRAND ROAD
GONZALEZ FL 32560-9999

FEIN/SSN

59-0976782

Location/Mailing Address Change:

New Location Address:

Telephone Number: (

New Mailing Address:

IN

SSOC

32560-0097

GONZALEZ FL

32560-0097

SOLUTIA EMPLOYEES RECREATION ASSN

SOLUTIA EMPLOYEES RECREATION ASSN

PO BOX 97

GONZALEZ FL

32560-0097

3000 OLD CHEMSTRAND ROAD

GONZALEZ FL 32560-9999

DOR USE ONLY

00/00/00

postmark or hand delivery date

Amount Due From Line 9

On Reverse Side

Electronic Funds Transfer:

Check here if payment was transmitted electronically.

Payment is due on the 1st
and LATE if postmarked
or hand delivered after

Verify/Correct Collection

Surplus Rate
MAR 20 2001
.0150

0057 009901 430301 270212473