

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 07, 2001 8:00 am
Secretary of State

02-07-2001 90188 041 ****61.25

DOCUMENT # N98000003988

1. Entity Name

HORTICULTURAL SOCIETY OF CHARLOTTE COUNTY, INC.

Principal Place of Business

FARR, FARR, EMERICH, ET. AL.
115 WEST OLYMPIA AVENUE
PUNTA GORDA FL 33948

Mailing Address

POST OFFICE BOX 380215
MURDOCK FL 33938-0215

2. Principal Place of Business

Suite, Apt. #, etc.

1540 Schenley St.

City & State
Port Charlotte, FL.

Zip

33952

Country

USA

3. Mailing Address

Post Office Box 380215

Suite, Apt. #, etc.

City & State

Port Charlotte, Florida

Zip

33938-0215

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0774280

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HACKETT, JACK O II
FARR, FARR, EMERICH, ET. AL.
115 WEST OLYMPIA AVENUE
PUNTA GORDA FL 33948

7. Name and Address of New Registered Agent

Name

Madeline Reed

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

18842 Ashcroft Circle

City

Port Charlotte, FL

Zip Code

33948

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

Madeline Reed - Treasurer

2/3/2001

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	VD	<input checked="" type="checkbox"/> Delete
NAME	CALDWELL, ROBERT A	
STREET ADDRESS	1540 SCHENLEY STREET	
CITY-ST-ZIP	PORT CHARLOTTE FL 33952	
TITLE	SD	<input type="checkbox"/> Delete
NAME	CALDWELL, KATHY A	same
STREET ADDRESS	1540 SCHENLEY STREET	
CITY-ST-ZIP	PORT CHARLOTTE FL 33952	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	ZEEB, JOAN	
STREET ADDRESS	4441 SWEETBAY STREET	
CITY-ST-ZIP	PORT CHARLOTTE FL 34948	
TITLE	TD	<input type="checkbox"/> Delete
NAME	REED, MADELINE	same
STREET ADDRESS	18842 ASHCROFT CIRCLE	
CITY-ST-ZIP	PORT CHARLOTTE FL 33948	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	PAPE, MELVIN C	
STREET ADDRESS	3116 MILLER STREET	
CITY-ST-ZIP	PORT CHARLOTTE FL 33980	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	KRAUS, GEORGE I	
STREET ADDRESS	23050 RYE AVENUE NE	
CITY-ST-ZIP	PORT CHARLOTTE FL 33980	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Caldwell, Robert A	
STREET ADDRESS	1540 Schenley Street	
CITY-ST-ZIP	PORT CHARLOTTE, FL 33952	
TITLE	MD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRAUS, George I	
STREET ADDRESS	23050 RYE AVE. NE	
CITY-ST-ZIP	PORT CHARLOTTE, FL 33980	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZEEB, JOAN	
STREET ADDRESS	4441 SWEETBAY ST.	
CITY-ST-ZIP	PORT CHARLOTTE, FL 33948	
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Taylor, Daniel	
STREET ADDRESS	1529 Kenmore St.	
CITY-ST-ZIP	PORT CHARLOTTE, FL 33952	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAPE, MELVIN C	
STREET ADDRESS	3116 MILLER STREET	
CITY-ST-ZIP	PORT CHARLOTTE, FL 33980	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GRADY PATRICIA	
STREET ADDRESS	585 WEST TARPON BLVD.	
CITY-ST-ZIP	PORT CHARLOTTE, FL 33952	

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 OF REGISTERED AGENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/3/2001

Date

255-3664

Daytime Phone #

CR2E037 (10/00)

Attachment
917510
#198000000 3988

**The Following are Directors in the year 2001, of
The Horticultural Society of Charlotte County, Inc.**

PD

**Caldwell, Robert
1540 Schenley Street
Port Charlotte, FL 33952**

D

**Pape, Melvin
3116 Miller Street
Port Charlotte, FL 33980**

VD

**Kraus, George
23050 Rue Ave. NE
Port Charlotte, FL 33980**

D

**Garvis, Delores
320 Singapore Road
Punta Gorda, FL 33950**

VD

**Taylor, Daniel
1529 Kenmore Street
Port Charlotte, FL 33952**

D

**Osborne, Gertrude
4634 Atwater Road
North Port, FL 34286**

TD

**Reed, Madeline
18842 Ashcroft Circle
Port Charlotte, FL 33948**

D

**Denny, Carmen
4229 Drance Street
Charlotte Harbor, FL 33980**

SD

**Caldwell, Kathy A
1540 Schenley Street
Port Charlotte, FL 33952**

D

**Marino, Thomas
1068 Archer Street
Port Charlotte, FL 33952**

SD

**Grady, Patricia
585 West Tarpon Blvd.
Port Charlotte, FL 33952**

D

**Musgrave, Donald
3310 Yukon Drive
Port Charlotte, FL 33948**

***D**

**Zeeb, Joan
4441 Sweetbay Street
Port Charlotte, FL 33948**

***D**

**Carroll, Wilma
19471 Hillsborough Blvd.
Port Charlotte, FL 33954**

***D**

**Macres, Thomas
722 Man Harald Road
Hayes, N.C. 28635**

*** Indicates past presidents who have one
vote between them.**