

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000004377

1. Entity Name

APOPKA AREA POLITICAL ALLIANCE, INC.

FILED
May 22, 2000 8:00 am
Secretary of State

05-22-2000 90133 005 ****61.25

Principal Place of Business

Mailing Address

180 EAST MAIN STREET
APOPKA FL 32703

180 EAST MAIN STREET
APOPKA FL 32703-5346

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

59-3531366

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

GARDINAR, ANDY
180 EAST MAIN STREET
APOPKA FL 32703

Name

David Rankin

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

2488 Semoran Blvd.

City

Apopka

FL

Zip Code

32703

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 ☐ Delete
NAME D
STREET ADDRESS FRANCIS, STEVEN J
CITY-ST-ZIP 1551 EAST SEMORAN BLVD.
APOPKA FL 32703

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

TITLE ☐ Delete
NAME D
STREET ADDRESS MCLEOD, RAYMOND A
CITY-ST-ZIP 48 EAST MAIN STREET
APOPKA FL 32703

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

TITLE ☐ Delete
NAME D
STREET ADDRESS SMOTHERS, HAROLD D
CITY-ST-ZIP 101 SOUTH PARK AVE.
APOPKA FL 32703

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

TITLE ☐ Delete
NAME D
STREET ADDRESS RANKIN, DAVID L
CITY-ST-ZIP 2488 SEMORAN BLVD.
APOPKA FL 32703

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

TITLE ☒ Delete
NAME D
STREET ADDRESS GARDINER, ANDREW C
CITY-ST-ZIP 180 EAST MAIN STREET
APOPKA FL 32703

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

TITLE ☐ Delete
NAME D
STREET ADDRESS GRABER, JAMES M
CITY-ST-ZIP 7 W. MAIN STREET
APOPKA FL 32703

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID L. RANKIN

Date

Daytime Phone #

CR2E037 (9/99)