## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # N98000006283

1. Entity Name

JUG CREEK CONSERVATION CLUB, INC.



**FILED** Feb 28, 2003 8:00 am § Secretary of State

02-28-2003 90121 037 \*\*\*\*61.25

			TE LUE			
Principal Place of Business	Mailing Address	<u>-L</u>				
00 S ORANGE AVE. STE 2810 200 S ORANGE AVE. STE 2810 ORLANDO FL 32801 ORLANDO FL 32801				•		
			18871161 618 1	Baba abida ugian baru guna ugara guna bara	18 1288: 38100 1111 1001	
2. Principal Place of Business Post Office Box 361877	3. Mailing Address Post Office Box 361877					
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
City & State Melbourne, FL	City & State Melbourne, FL 00.03		4. FEI Number 5	FEI Number <b>59-3544719</b> Applied For Not Applicable		
Zip Country 32936 United States	1	Country United Sta	ates 5. Certificate of S	tatus Desired	75 Additional	
6. Name and Address of Curren	t Registered Agent		7. Name and Add	iress of New Registered Agen	- 4	
		Name				
HARTLEY, CARL W JR	Street A	CT Corporation Street Address (P.O. Box Number is Not Acceptable)				
200 S ORANGE AVE, STE 2810		000(1)	et Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Road			
ORLANDO FL 32801						
		City	· · · · · · · · · · · · · · · · · · ·	<b></b>	in Code	
8. The above named entity submits this statement 6	Plantation	FL   <sup>2</sup>	Tip Code 33324			
<ol><li>The above named entity submits this statement for the obligations of registered agent.</li></ol>	or the purpose of changing its	registered office or <b>R</b>	registered agent, or both, in IBARA A. BURKE	the State of Florida. I am familia	ar with, and accept	
(Page 1	a Bun na	SPECIAL A	ASSISTANT SECRETARY	· h ~ .	<b>^</b> 3	
SIGNATURE TOWNS	Lull	=		Wit.	00	
SIGNATURE Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signatu	re required when reinstating)	DATE	·	
639						
FILE NOW: FEE IS \$61.25 9. Election Camp		paign Financing	- WOLDO MAY BE I MARC ONCOR FAVABLE TO		vable to	
Trust Fund Cor		ontribution.	Added to Fees Florida Department of State			
10. OFFICERS AND DI	DE 0.7000		<u> </u>	•		
10. OFFICERS AND DI		11.		ES TO OFFICERS AND DIRECTO	ORS IN 10	
NAME HARTLEY, CARL W JR	☐ Delete	TITLE	D		hange 🔲 Addition	
STREET ADDRESS 200 S ORANGE AVE, STE 2810		NAME STREET ADDRESS	Hartley, Carl W Post Office Box			
CITY-ST-ZIP ORLANDO FL 32801		CITY-ST-ZIP	Orlando, FL 32		] 5	
TITLE D	□ Delete	TITLE	P/D	<del></del>		
NAME CONNOR, DOUG	D.I.C.(C	NAME	Connor, Doug	X) C	hange 🗀 Addition   6	
STREET ADDRESS 3675 PARKWAY DRIVE			Post Office Box 361877			
CITY-ST-ZIP MELBOURNE FL 32934	the state of the s	CITY-ST-ZIP		32936		
TITLE D	☐ Delete	TITLE		<u>52550</u> □ C	hange Addition	
NAME HAMANN, RICHARD		NAME		υ	Hange Mudition	
STREET ADDRESS 230 BRUTON GREER HALL,U OF	F	STREET ADDRESS			}	
GAINESVILLE FL 32611		CITY-ST-ZIP				
TITLE	☐ Delete	TITLE			hange Addition	
NAME		NAME			J	
STREET ADDRESS		STREET ADDRESS				

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

☐ Delete

Delete

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

OUCATE W: Hartley, Jr. as Director 2/26/03 407)422-7992

Change

☐ Change

Addition

Addition

<sup>12.</sup> I hereby certify that the information supplied with this filling 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.