

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000007314

1. Entity Name

TAMPA BAY MAGIC CLUB, INC.

Principal Place of Business

11472 64TH AVENUE NORTH
SEMINOLE FL 33772

Mailing Address

11472 64TH AVENUE NORTH
SEMINOLE FL 33772

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

59-3550257

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

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

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
After September 12, 2001, min. will be \$236.25

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
NAME PD
STREET ADDRESS GAUGHAN, PATRICK
CITY-ST-ZIP 11472 64TH AVENUE NORTH
SEMINOLE FL 33772 ☐ Delete

TITLE
NAME VD
STREET ADDRESS KLASE, ROBERT
CITY-ST-ZIP 1343 DONEGAN RD
LARGO FL 33771 ☐ Delete

TITLE
NAME TD
STREET ADDRESS KREMER, HENRY
CITY-ST-ZIP 7620 QUAIL MEADOW CT
NEW PORT RICHEY FL 34655 ☒ Delete

TITLE
NAME SD
STREET ADDRESS WHITE, W.M.H.
CITY-ST-ZIP 12018 -101ST AVE N.
SEMINOLE FL 33772 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME PD
STREET ADDRESS KLASE, Robert
CITY-ST-ZIP 1343 DONEGAN RD
LARGO, FL 33771 ☒ Change ☐ Addition

TITLE
NAME VD
STREET ADDRESS CAFAZZO, Robert F.
CITY-ST-ZIP 3913 ARLINGTON DR.
PALM HARBOR, FL 34685 ☒ Change ☒ Addition

TITLE
NAME TD
STREET ADDRESS GAUGHAN, PATRICK
CITY-ST-ZIP 11472 64TH AVE. North.
SEMINOLE, FL 33772 ☒ Change ☐ Addition

TITLE
NAME SD
STREET ADDRESS WOLIN, PAMELA R.
CITY-ST-ZIP 124 KENDALE DR
SAFETY HARBOR, FL 34695 ☒ Change ☒ Addition

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

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

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:

PAMELA R. WOLIN

8/27/01

737-796-1164

FILED
Sep 06, 2001 8:00 am
Secretary of State

09-06-2001 90009 002 ****61.25



DO NOT WRITE IN THIS SPACE

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CR2E037 (5/01)