

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N99000000460**

1. Entity Name

CLEARWATER SHUFFLEBOARD CLUB, INC.**FILED**
Jan 23, 2001 8:00 am
Secretary of State

01-23-2001 90081 015 ****70.00

Principal Place of Business

**1020 CALUMET ST.
CLEARWATER FL 33755**

Mailing Address

**1020 CALUMET ST.
CLEARWATER FL 33755****00006836**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1020 Calumet Street

Suite, Apt. #, etc.

Clearwater, Fl. 33755

3. Mailing Address

1020 Calumet Street

Suite, Apt. #, etc.

Clearwater, Fl. 33755City & State
Florida 33755City & State
Florida, 337554. FEI Number
59-0690203

Applied For

Not Applicable

Zip
33755Country
PinellasZip
33755Country
Pinellas5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CRAWFORD, VINCE
1415 MAIN STREET
LOT 267
DUNEDIN FL 34698**

7. Name and Address of New Registered Agent

Name

Vince Crawford

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

1415 Main Street**Lot #267**

City

Dunedin, Fl.**FL**Zip Code
34698

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

VINCE CRAWFORD**1/11/01**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
KLINGER, MARY
299 TARPON LANE
OLDSMAR FL 34677** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
TOUCHETTE, DON
10387 112 WAY NORTH
LARGO FL 34648** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
LAWRENCE, SAM
2723 D SHERBROOKE LN.
PALM HARBOR FL 34684** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
SEGAR, ILLA
3113 STATE ROAD 580, #244
SAFETY HARBOR FL 34695** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
EMRICH, CHRIS
601 STARKEY ROAD, LOT. 27
LARGO FL 33771** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SEGAR, EVAN
3113 STATE ROAD 580, #244
PALM HARBOR FL 34695** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
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:

VINCE CRAWFORD**1/11/01**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)