

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000000699

1. Entity Name

TARPON SPRINGS HIGH SCHOOL AGRISCIENCE BOOSTERS, *f*

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

08-22-2000 90220 005 ****61.25

Principal Place of Business	Mailing Address
TARPON SPRINGS HIGH SCHOOL GULF RD. TARPON SPRINGS FL 34689	30 N. RING AVE., SUITE 400 TARPON SPRINGS FL 34689



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		23 E. Tarpon Ave.	
City & State		Tarpon Springs, FL	
Zip	Country	Zip	Country
34689	US	34689	US

4. FEI Number	Applied For
59-3557583	Not Applicable

5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
----------------------------------	---

6. Name and Address of Current Registered Agent
KLIMIS, GEORGE N 30 N. RING AVE., SUITE 400 TARPON SPRINGS FL 34689

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
23 E. Tarpon Ave.
City
Tarpon Springs FL
Zip Code
34689

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]* DATE 8/18/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEB IS \$61.25 After September 13, 2000 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	
TITLE	PD ☐ Delete
NAME	FLAMMER, JIM
STREET ADDRESS	41975 US HWY. 19 NO.
CITY-ST-ZIP	TARPON SPRINGS FL 34689
TITLE	VD ☐ Delete
NAME	LANE, ANNE
STREET ADDRESS	2669 ST. ANDREWS BLVD.
CITY-ST-ZIP	TARPON SPRINGS FL 34689
TITLE	STD ☐ Delete
NAME	MAY, VICKI
STREET ADDRESS	932 ROYAL BIRKDALE DR.
CITY-ST-ZIP	TARPON SPRINGS FL 34689
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	VD ☒ Change ☐ Addition
NAME	Flammer, Jim
STREET ADDRESS	41975 US Hwy. 19 N
CITY-ST-ZIP	Tarpon Springs, FL 34689
TITLE	STD ☒ Change ☐ Addition
NAME	Lane, Anne
STREET ADDRESS	2669 St. Andrews Blvd.
CITY-ST-ZIP	Tarpon Springs, FL 34689
TITLE	PD ☒ Change ☐ Addition
NAME	May, Vicki
STREET ADDRESS	932 Royal Birkdale Dr.
CITY-ST-ZIP	Tarpon Springs, FL 34689
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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]* President DATE 8/18/00 (727) 938-3776
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (5/00)