## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 10, 2001 8:00 am s Secretary of State DOCUMENT # N9900001658 1. Entity Name ZEPHYRHILLS AERO CLUB, INC. 04-10-2001 90078 029 \*\*\*\*61.25 Principal Place of Business Mailing Address 3947 MENDOTA LN 3947 MENDOTA LN ZEPHYRHILLS FL 33541 ZEPHYRHILLS FL 33541 3. Mailing Address 2. Principal Place of Business 7456 ALAFIA RIDGE LOOP SAME Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE RIVERVIEW, FL City & State 4. FEI Number Applied For SAM E NOT APPLICABLE Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent EVANS O Box Number is Not Acceptable) RANSBOTTOM, THERESA 3947 MENDOTA LN ZEPHYRHILLS FL 33541 RIVERVIEW 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. 04-02-01 SIGNATURE 💆 Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees FEE IS \$61.25 Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. Change PD ☐ Delete TIT! F TITLE EVANS, DAN 7456 ALAFIA RIDGE LOOP NAME NAME EVANS, DAN STREET ADDRESS STREET ADDRESS 3947 MENDOTA LN RIVERVIEW. FL CITY-ST-ZIP CITY-ST-ZIP ZEPHYRHILLS FL 33541 ☐ Addition ☐ Delete TITLE ☐ Change TITLE JOFFRION, JOEL NAME STREET ADDRESS STREET ADDRESS 3947 MENDOTA LN. CITY-ST-ZIP CITY-ST-7IP ZEPHYRHILLS FL 33541 **VPD** Change ☐ Addition □ Delete TITLE BEATY, KATHIE NAME STREET ADDRESS STREET ADDRESS 3947 MENDOTA LN CITY-ST-ZIP CITY-ST-ZIP ZEPHYRHILLS FL 33541 ☐ Change ☐ Addition TITLE ☐ Detete WALLACE, BARRY STREET ADDRESS STREET ADDRESS 3947 MENDOTA LN

ZEPHYRHILLS FL 33541 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 of

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