

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000002882

FILED
May 01, 2002 8:00 AM
Secretary of State

Entity Name: CITIZENS FOR WEST MEADOWS, INC.

Current Principal Place of Business:

PO BOX 46596
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

PO BOX 46596
TAMPA, FL 33647

New Mailing Address:

FEI Number: 59-3572228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEINARD, MICHAEL J
18904 BEACHDROP PLACE
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ADAMS, MARSHALL
Address: 8621 HERONS COVE PLACE
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: WEINARD, MICHAEL J
Address: 18904 BEACHDROP PLACE
City-St-Zip: TAMPA, FL 33647

Title: VD () Delete
Name: MARTIN, JIM
Address: 19141 TIMBER REACH RD
City-St-Zip: TAMPA, FL 33647

Title: SD () Delete
Name: SCHMIDT, JENNIFER
Address: 18838 DUQUESNE DR
City-St-Zip: TAMPA, FL 33647

Title: SD (X) Delete
Name: KOPESKY, HAGAR
Address: 18836 DUQUESNE DR
City-St-Zip: TAMPA, FL 33647

Title: D (X) Delete
Name: VIEN, MARY
Address: 19124 AUTUMN WOODS AVE
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: VIEN, MARY
Address: 19124 AUTUMN WOODS DRIVE
City-St-Zip: TAMPA, FL 33647

Title: TSD (X) Change () Addition
Name: MCAVEETY, SUSAN
Address: 8621 FOXTAIL COURT
City-St-Zip: TAMPA, FL 33647

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN K. MCAVEETY

TSD

05/01/2002

Electronic Signature of Signing Officer or Director

Date