

2000 UNIFORM BUSINESS REPORT (UBR)

4.

DOCUMENT # N99000003492

1. Entity Name

RIVERWOOD NEIGHBORHOOD COUNCIL, INC.

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

04-14-2000 90021 050 ****61.25

Principal Place of Business

Mailing Address

MS. PAT POLLARD
13789 LONG LAKE LANE
PORT CHARLOTTE FL 33953

MS. PAT POLLARD
13789 LONG LAKE LANE
PORT CHARLOTTE FL 33953-5673

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0918873

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

POLLARD, PAT
13789 LONG LAKE LANE
PORT CHARLOTTE FL 33953

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

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 President (D) ☒ Delete
NAME Jerry Elbers
STREET ADDRESS 3000 Rivershore LN
CITY-ST-ZIP PT. Charlotte, FL 33953

TITLE President ☒ Change ☐ Addition
NAME RONALD L. POLLARD (D)
STREET ADDRESS 13789 LONG LAKE LANE
CITY-ST-ZIP PORT CHARLOTTE, FL 33953

TITLE VICE President (D) ☒ Delete
NAME FRANK SAKALOSKY
STREET ADDRESS 13900 LONG LAKE LN
CITY-ST-ZIP PT. Charlotte, FL 33953

TITLE VICE President (D) ☒ Change ☐ Addition
NAME DAVE PUSKARICH
STREET ADDRESS 3061 RIVERSHORE LANE
CITY-ST-ZIP PORT CHARLOTTE, FL 33953

TITLE Treasurer (D) ☒ Delete
NAME Libby Curnow
STREET ADDRESS 3438 PENNYROYAL RD
CITY-ST-ZIP PT. Charlotte, FL 33953

TITLE Treasurer (D) ☒ Change ☐ Addition
NAME JAY ALDRIDGE
STREET ADDRESS 3301 PENNYROYAL ROAD
CITY-ST-ZIP PORT CHARLOTTE, FL 33953

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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)(f), 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 of Ronald L. Pollard
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/00
Date

941-255-0894
Daytime Phone #

CR02037 (9/99)