## **2000 UNIFORM BUSINESS REPORT (UBR)**

## May 23, 2000 8:00 am Secretary of State DOCUMENT # **N99000004846** 1. Entity Name LA PALOMA NORTH NEIGHBORHOOD WATCH & CIVIC ASSOC 05-23-2000 90255 027 \*\*\*\*61.25 Principal Place of Business Mailing Address 3520 N. 9TH ST. 3520 N. 9TH ST. TAMPA FL 33605-1004 TAMPA FL 33605-1004 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number Not Applicable Zip 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 Street Address (P.O. Box Number is Not Acceptable) RAMOS, SANDRA 3520 N. 9TH ST. TAMPA FL 33605-1004 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 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Addition ☐ Delete Lillian MOH ☐ Change TITLE NAME RAMOS, SANDRA NAME 1010 E. 31st AVE STREET ADDRESS STREET ADDRESS 3520 N. 9TH ST. Tampa FL 33603 CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33605-1004 ☐ Delete TITLE Lee Kirkpatrick Change Addition n TITLE CLARK, GENEVA NAME NAME 801 E. Stratford Ave STREET ADDRESS. STREET ADDRESS 1311 E. 32ND AVE. Tampa, PL 3360,3 CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33605 Evelyn Kirkpatrick TITLE ☐ Change Addition Delete TITLE 801 E. Strafford Ave NAME NAME DOUGHERTY, CARRIE STREET ADDRESS STREET ADDRESS 1102 E. 26TH AVE. CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33605** Change Addition ☐ Delete TITLE TITLE Teresa' Hernandez DELVALLE, ZAIDA H NAME NAME 2915 N. 124 St STREET ADDRESS STREET ADDRESS 2915 N. 12TH ST. CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33605** ☐ Addition D ☐ Delete TITLE Change RAMOS, JOSEPH NAME STREET ADDRESS STREET ADDRESS 3520 N. 9TH ST. CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33605-1004 ☐ Change ■ Addition TITLE ☐ Delete TITLE NAME RICHARDS, JOHN NAME STREET ADDRESS STREET ADDRESS 3516 N. 9TH ST. CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33605**

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

SIGNATURE: SWILLIAM KATION PSHINDLA PRIMOS

changed, or on an attachment with an addres

1/2000 (83)202-0078

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