2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9900005908

FLORIDA CITIZENS ASSOCIATION, INC.

Principal Place of Business 4405 METRIC DRIVE WINTER PARK FL 32792

Mailing Address

4405 METRIC DRIVE WINTER PARK FL 32792-6904

2. Principal Place o	f Business	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip	Country	Zip Country Country					

FILED May 11, 2000 8:00 am Secretary of State

05-11-2000 90294 037 ****61.25

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2. Principal F	Place of Business	3. Mailing Address								
Suite, Apt. #, etc. Suite, Apt. #, etc.			.	,,,	DO NOT WRITE IN THIS SPACE					
City & State City & State					4. FEI Numbe	4. FEI Number		plied For		
Zip	Country Zip			try	5. Certificate of Status Desired					
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
<u>—</u>				Name	_		•			
					Street Address (P.O. Box Number is Not Acceptable)					
SAPORITO, MICHAEL				Discoving a cook in the cooperatory						
	RIC DRIVE									
WINTER PARK FL 32792			-	City	ty FL Zip Code					
							<u>- </u>			
8. The above	e named entity submits this statement for	the purpose of changing i	its registered	d office or regis	stered agent, or both	n, in the state of Florida.				
	//// /////////////////////////////////</td <td></td> <td></td> <td></td> <td></td> <td>Marlan</td> <td>_</td> <td>Į</td>					Marlan	_	Į		
SIGNATURE	/// / Weller Won	outo				1/20/2000				
OIGITI II OI IE	Signature typed or printed name of registered agent a	nd title if applicable (N	OTE: Registered	Agent signature requ	uired when reinstating)	DATE				
										
	FILE NOW: 9. Election Campaign F			ing \$5.00 May Be Make Check Payable			c Payable to	•		
FEE IS \$61.25 Trust Fund			tribution. Adde		lded to Fees	d to Fees Department of State				
	05510550 4410 010	COTOGO	-		ADDITIONS IS U	NOTE TO OFFICERS AND	DIRECTORS IN	10		
10.	OFFICERS AND DIR	ECTORS Days	11.		AUDITIONS/CHA	ANGES TO OFFICERS AND I	Change	Addition		
TITLE NAME	Charlie Mealy	Delete	TITLE NAME				Change	E Addition		
STREET ADDRESS	1451 Dexter Drive	<u>L</u>		ADDRESS				ļ		
CITY-ST-ZIP	Clearwater, FL		CITY-	1				İ		
TITLE	Dicector		TITLE				Change	Addition		
NAME	Donald H wolff 200 NE 16 Are	y Donate	NAME	J				_		
STREET ADDRESS	200 NE 16 Are		STREE	ADDRESS	-			İ		
CITY-ST-ZIP	Gainsville, FL	32601	~ - city-:	ST-ZIP		<u>م</u> يوماه بي <u>ند</u> اير البيد المياد داياج	<u>, </u>	· · · · ·		
TITLE	Director	☐ Delete	TITLE				Change	☐ Addition		
NAME	George R. Russo	m	NAME							
STREET ADDRESS	3765 Heather A	Dr. East		ADDRESS						
CITY-ST-ZIP	l . Coreenacres, FL	<i>334</i> 63	CITY-	ST-ZIP						
TITLE	Dir Clark Vargas 4524 Juling	☐ Delete	TITLE				. Change	☐ Addition		
NAME	4524 10/19	on Creek Rd	NAME							
STREET ADDRESS	Jackonville	,1-1 32258	STREE CITY-	T ADDRESS				}		
CITY-ST-ZIP	DIR.			1) - ZII						
TITLE NAME	Iner Rosado	☐ Delete	TITLE NAME				☐ Change	☐ Addition		
STREET ADDRESS	40 4405 Metrics	r ,		ADDRESS						

12. I hereby certify that the information supplied with this filling 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 eppowered 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

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

☐ Delete

Change

Addition