

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000006084

1. Entity Name

MYRTLE GROVE NEIGHBORHOOD WATCH, INC.

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90157 032 ****70.00

A0056919

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
Myrtle Grove Myrtle Grove
Neighborhood Watch Neighborhood Watch, Inc.
5398 Lillian Hwy., #35 5398 Lillian Hwy., #35
Pensacola, FL 32506 Pensacola, FL 32506

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

4. FEI Number 59-3531305 Applied For Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

T. Wayne Shick
5398 Lillian Hwy., #35
Pensacola, FL 32506

7. Name and Address of New Registered Agent

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 T. Wayne Shick, President

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

April 17, 2001

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing \$5.00 May Be Added to Fees
Trust Fund Contribution ☐

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P = T. Wayne Shick <input type="checkbox"/> Delete 5398 Lillian Hwy., #35 Pensacola, FL 32506	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V = Mel Martin <input type="checkbox"/> Delete 6450 Birkhead Drive Pensacola, FL 32506	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T = Mary Bennett <input type="checkbox"/> Delete 63 DeLuna Drive Pensacola, FL 32506	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S = Preston Clifton <input checked="" type="checkbox"/> Delete 26 Adkinson Drive Pensacola, FL 32506	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D = Joseph F. Holberg <input type="checkbox"/> Delete 803 North 63rd Avenue Pensacola, FL 32506	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D = Bill Shelby <input type="checkbox"/> Delete 26 Linda Street Pensacola, FL 32506	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 other like empowered.

SIGNATURE T. Wayne Shick, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/01

Date

850-453-1508

Daytime Phone #

CR2E037 (11/00)