

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000007218

1. Entity Name

CLEARWATER ALL-AMERICAN SERTOMA CLUB, INC.

FILED

Apr 18, 2002 8:00 am  
Secretary of State

04-18-2002 90461 002 \*\*\*\*61.25

Principal Place of Business

Mailing Address

PRINCIPAL PLACE OF BUSINESS  
100 BAYMONT STREET  
CLEARWATER FL 33767

C/O CHARLES FAZIO  
240 SAND KEY ESTATES DR., #64  
CLEARWATER FL 33767

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

59-3610854

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

FAZIO, CHARLES  
240 SAN KEY ESTATES DR., #64  
CLEARWATER FL 33767

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 PD ☐ Delete  
NAME O'DOWD, JIM  
STREET ADDRESS 1816 NORTHWOOD DR  
CITY-ST-ZIP CLEARWATER FL 33764

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

TITLE STD ☒ Delete  
NAME FAZIO, CHARLES  
STREET ADDRESS 240 SAND KEY ESTATES DR #64  
CITY-ST-ZIP CLEARWATER FL 33767

TITLE SD ☐ Change ☒ Addition  
NAME Day, Edgar  
STREET ADDRESS 2630 Enterprise Rd  
CITY-ST-ZIP CLEARWATER FL 33763

TITLE VPD ☒ Delete  
NAME BURK, BOB  
STREET ADDRESS 1988 GULF TO BAY  
CITY-ST-ZIP CLEARWATER FL 33765

TITLE VPD ☐ Change ☒ Addition  
NAME J.B. Johnson  
STREET ADDRESS 3237 San Pedro St  
CITY-ST-ZIP CLEARWATER FL 33759

TITLE VPD ☐ Delete  
NAME DORAN, JOHN  
STREET ADDRESS 65 VERBENA STREET  
CITY-ST-ZIP CLEARWATER FL 33767

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

TITLE VPD ☒ Delete  
NAME O'DOWD, GLENDA  
STREET ADDRESS 1816 NORTHWOOD DR  
CITY-ST-ZIP CLEARWATER FL 33764

TITLE VPD ☐ Change ☒ Addition  
NAME William Niels  
STREET ADDRESS 1002 Webb Drive  
CITY-ST-ZIP CLEARWATER FL 33755

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD ☐ Change ☒ Addition  
NAME Isackson, Ron  
STREET ADDRESS 1806 Cypress Trace Drive  
CITY-ST-ZIP SAFETY HARBOR FL 34695

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:

SIGNATURE REQUIRED Edgar Day

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

727-791-4511

4/4/02

CR2E037 (9/01)