

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P14386

1. Entity Name

RESORT & COMMERCIAL RECREATION ASSOCIATION INCOR

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

05-11-2000 90317 033 ****61.25

Principal Place of Business

Mailing Address

P. O. BOX 1998
TARPON SPRINGS FL 34688-1998
US

P. O. BOX 1998
TARPONS SPRINGS FL 34688-1998
US

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

57-0743724

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

OLIVETO, RCRA F
1304 RIDGE TOP DR
TARPON SPRINGS FL 34689

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
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
JEWETT, HEIDI
MOHONK MOUNTAIN HOUSE, 1000 MOUNTAIN REST
NEW PALTZ NY 12561 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D/V ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPE
BRAYLEY, RUSS
HPER BLDG ROOM 133
BLOOMINGTON IN 47415-4801 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D/P ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
BROADIE, NADINE
1324 ARROWHEAD COURT
AUBURNDAL FL 33823 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPE
STEVE GEISZ
4350 HWY 64 WEST
SAPPHIRE NC 28774 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
WAMPLER, KEN
400 PINE LAKES PKWY
PALM COAST FL 32164-3602 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
RISKA-HALL, TERESA D
SUNDIAL BEACH RESORT 1451 MIDDLE GULF DR
SANIBEL FL 33957 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
JENNIFER CHASEK
6929 GRAND VACATIONS WAY
ORLANDO FL 32821 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
O
OLIVETO, FRANK
1304 RIDGE TOP DR.
TARPON SPRINGS FL 34689 ☐ Delete

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

Frank Oliveto
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-2000

Date

727 939 8811

Daytime Phone #

CR2E037 (9/99)