

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 06, 2001 8:00 am**  
**Secretary of State**

06-06-2001 90007 016 \*\*\*550.00

**DOCUMENT # P35848**

1. Entity Name

**EBONITE RECREATION CENTERS, INC.**

Principal Place of Business

Mailing Address

**C/O EBONITE RECREATION CENTERS, INC.  
 322 E JAMES CAMPBELL BLVD  
 COLUMBIA TN 38401  
 US**

**322 E. JAMES CAMPBELL BLVD  
 COLUMBIA TN 38401  
 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

**65-0286989**

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

**BENTLEY, MORGAN R ESQ  
 C/O WILLIAMS PARKER HARRISON & GETZEN  
 200 S. ORANGE AVENUE  
 SARASOTA FL 34236**

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.

(NOT

Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW !! FEE IS \$150.00  
 After MAY 1, 2001 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete  
 NAME **TUTTLEMAN, STANLEY C.**  
 STREET ADDRESS **375 N HIGHLAND AVENUE**  
 CITY-ST-ZIP **MERION STATION PA**

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

TITLE **D** ☐ Delete  
 NAME **SCHEID, WILLIAM T.**  
 STREET ADDRESS **1329 SHALLOW LAKE CIRCLE**  
 CITY-ST-ZIP **HOPKINSVILLE KY**

TITLE **P.D.** ☒ Change ☐ Addition  
 NAME **SCHEID, WILLIAM T.**  
 STREET ADDRESS **1329 SHALLOW LAKE CIRCLE**  
 CITY-ST-ZIP **HOPKINSVILLE, KY. 42240**

TITLE **SD** ☐ Delete  
 NAME **TUTTLEMAN, STEVEN M.**  
 STREET ADDRESS **40 BEDFORD STREET**  
 CITY-ST-ZIP **NEW YORK NY**

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

TITLE **PTD** ☒ Delete  
 NAME **MALLOY, THOMAS V., JR**  
 STREET ADDRESS **24 MARINA VILLAGE WAY**  
 CITY-ST-ZIP **SALEM SC**

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

TITLE **T** ☒ Delete  
 NAME **MCCUTCHEON, LARRY C**  
 STREET ADDRESS **537 PINE CIRCLE**  
 CITY-ST-ZIP **HOHENWALD TN 38462**

TITLE **T.D.** ☐ Change ☒ Addition  
 NAME **TERRY L. WINDHORST**  
 STREET ADDRESS **1813 W. 7TH ST., P.O. BOX 746**  
 CITY-ST-ZIP **HOPKINSVILLE, KY. 42241-0746**

TITLE **S** ☒ Delete  
 NAME **MCDavid, MELINDA A**  
 STREET ADDRESS **1265 JOSTIN DRIVE**  
 CITY-ST-ZIP **CLARKSVILLE TN 37040**

TITLE **S-ASSISTANT** ☐ Change ☒ Addition  
 NAME **CARL L. ROGERS**  
 STREET ADDRESS **1813 W. 7TH ST., P.O. BOX 746**  
 CITY-ST-ZIP **HOPKINSVILLE, KY. 42241-0746**

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

**TERRY L. WINDHORST-TREASURER**

**5-31-01 270-881-1202**

Date

Daytime Phone #

CR2E034 (10/00)