

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P97000024540

1. Entity Name

Century Senior Association, Inc.

Principal Place of Business

Mailing Address

6735 54th Ave N. Lot 31
St. Petersburg, Fl. 33709

2. Principal Place of Business

3. Mailing Address

AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3437468

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

S Joyce Charles
6735 54th Ave. N. Lot 89
St. Petersburg, Fl. 33709

Name

Dorothy R. Zander

Street Address (P.O. Box Number is Not Acceptable)

6735 54th Ave. No. Lot 31

City

St. Petersburg,

FL

Zip Code

33709

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

Dorothy R. Zander

Treas.

Apr. 3, 2000

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

(NOTE: 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, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

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\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Leo Decker 6735 54th Ave. N. Lot 56 St. Petersburg, Fl. 33709	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Ronald Pomroy 6735 54th Ave. N. Lot 10 St. Petersburg, Fl. 33709	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Joyce Charles 6735 54th Ave. N. Lot 89 St. Petersburg, Fl. 33709	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Dorothy R. Zander 6735 54th Ave. N. Lot 31 St. Petersburg, Fl. 33709	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST Carolyn Hargrave 6735 54th Ave. N. Lot 59 St. Petersburg, Fl. 33709	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Raymond Cox 6735 54th Ave. N. Lot 53 St. Petersburg, Fl. 33709	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Ronald Pomroy 6735 54th Ave. N. Lot 10 St. Petersburg, Fl. 33709	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Ethel Chase 6735 54th Ave. N. Lot 64 St. Petersburg, Fl. 33709	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Carolyn Hargrave 6735 54th Ave. N. Lot 59 St. Petersburg, Fl. 33709	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D William Stearns 6735 54th Ave. N. Lot 84 St. Petersburg, Fl. 33709	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lucille Shanks 6735 54th Ave. Lot 49 St. Petersburg, Fl. 33709	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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:

Dorothy R. Zander

Dorothy R. Zander, Treas.

Apr. 3, 2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)