

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N41213

1. Entity Name

DESOTO CITIZENS AGAINST POLLUTION, INC.

FILED
Apr 10, 2000 8:00 am
Secretary of State

04-10-2000 90162 006 ****61.25

Principal Place of Business

Mailing Address

P.O. BOX 2706
 ARCADIA FL 34265-2706
 US

P.O. BOX 2706
 ARCADIA FL 34265-2706



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4070 SW ARMADILLO TR

3. Mailing Address

4070 SW ARMADILLO TR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
ARCADIA FL

City & State
ARCADIA FL

4. FEI Number
65-0241208

Applied For
 Not Applicable

Zip
34266 Country

Zip
34266 Country

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

CHASE, JOYCE A.
1183 NW GIRL SCOUT ROA
ARCADIA FL 34266

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	DP	<input type="checkbox"/> Delete
NAME	BEHRENS, ALAN	
STREET ADDRESS	4070 SW ARMADILLO TRAIL	
CITY-ST-ZIP	ARCADIA FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	CHASE, GEORGE B.	
STREET ADDRESS	1183 GIRL SCOUT RD.	
CITY-ST-ZIP	ARCADIA FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	CHASE, JOYCE A.	
STREET ADDRESS	1183 GIRL SCOUT RD.	
CITY-ST-ZIP	ARCADIA FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BROWN, MAURICE	
STREET ADDRESS	P.O. BOX 424 N/A	
CITY-ST-ZIP	ARCADIA FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	POLLOCK, LARAIN	
STREET ADDRESS	1261 SW NOMIE DRIVE	
CITY-ST-ZIP	ARCADIA FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Joyce A. Chase
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/00
 Date

863-993-0391
 Daytime Phone #

CR2E037 (9/99)