

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 28, 2000 8:00 am
Secretary of State

08-28-2000 90035 028 ****70.00

DOCUMENT # N42113

1. Entity Name

IAC CHAPTER 89, INC. P

Principal Place of Business

IAC CHAPTER 89, INC.
 8780 SE 70TH TERRACE
 Ocala FL 34472
 US

Mailing Address

IAC CHAPTER 89, INC.
 8780 SE 70TH TERRACE
 Ocala FL 34472
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3047418

Applied For

Not Applicable

Zip

Country

Zip

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

WEAVER, FREDERICK G
8780 SE 70TH TERRACE
OCALA FL 34472

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
After September 13, 2000 min. will be \$236.25

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 **D** Delete
 NAME **SEBEXEN, RALPH H**
 STREET ADDRESS **8927 SE 72ND AVE**
 CITY-ST-ZIP **OCALA FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **ROSSI, JAMES B**
 STREET ADDRESS **7164 SE 93RD ST**
 CITY-ST-ZIP **OCALA FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **TELLECHEA, CHARLES M**
 STREET ADDRESS **8977 SE 72ND AVE**
 CITY-ST-ZIP **OCALA FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **PARKER, RAYMOND L**
 STREET ADDRESS **9180 SE 70 TERR**
 CITY-ST-ZIP **OCALA FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **BUREL, ALVIN B**
 STREET ADDRESS **9451 S.E. 72ND AVE.**
 CITY-ST-ZIP **OCALA FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **Treasurer Frederick G. WEAVER**
 STREET ADDRESS **8780 SE 70th Terrace**
 CITY-ST-ZIP **Ocala, FL 34472**

TITLE Change 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:

Frederick G. Weaver

REQUIRE

Frederick G. WEAVER

Aug 22, 2000

(352)-347-3048

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/00)