

**DBPR ABT-6003 – Division Of Alcoholic Beverages and Tobacco Application for
One/Two/Three Day Permits or Special Sales License**

**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**DBPR Form
ABT- 6003
Revised 09/2010**

NOTE – This form must be submitted as part of an application packet

If you have any questions or need assistance in completing this application, please contact the Department of Business and Professional Regulation or your local district office. Please submit your completed application to your local district office at least (7) days prior to the first date of the event to insure the permit is issued by the event date. This application may be submitted by mail, or it can be dropped off. A District Office Address and Contact Information Sheet can be found on AB&T's page of the DBPR web site at the link provided below.

<http://www.state.fl.us/dbpr/abt/contact/index.shtml>

SECTION 1 -- CHECK TRANSACTION REQUESTED

Transaction Type:

☒ One/Two/Three Day Permit

☐ Special Sales License

SECTION 2 – LICENSE INFORMATION

Full Name of Applicant Organization (This is the name the license/permit will be issued in)
WEST PASCO SERTOMA CLUB INC.

Department of State Division of Corporations Document #

FEIN Number
51-0252228

Business Name (D/B/A) or Name of Event
WEST PASCO SERTOMA BEEF BBQ

Location of Event (Street and Number)
6341 BANK STREET (Sim's Park)

City
New Port Richey

County
Pasco County

State
FL

Zip Code
34652

Mailing Address (Street or P.O. Box)
P.O. Box 1302

City
New Port Richey,

State
FL

Zip Code
34652

Contact Person
Debra Golinski

Telephone Number
727-808-2612 ext.

Email Address
debra@familyhearinghelp.org

Date(s) Permit Desired
March 24, 2023

March 25,2023

March 26, 2023

ABT District Office Received / Date Stamp

SECTION 3 – SALES TAX TO BE COMPLETED BY THE DEPARTMENT OF REVENUE	
Full Name of Applicant Organization WEST PASCO SERTOMA CLUB, INC.	
The named applicant for a license/permit has complied with the Florida Statutes concerning registration for Sales and Use Tax and has agreed to pay any applicable taxes due.	
Signed _____	Date _____
Title _____	
Department of Revenue Stamp:	

SECTION 4 - ZONING TO BE COMPLETED BY THE ZONING AUTHORITY GOVERNING THE EVENT LOCATION	
Location of Event (Street and Number) 6341 BANK STREET (Sim's Park)	
City New Port Richey	County Pasco
The location complies with zoning requirements for the temporary sale of alcoholic beverages pursuant to this application for a One/Two/Three Day Permit.	
Signed _____	Date <u>2/16/25</u>
Title <u>PLANNER</u>	

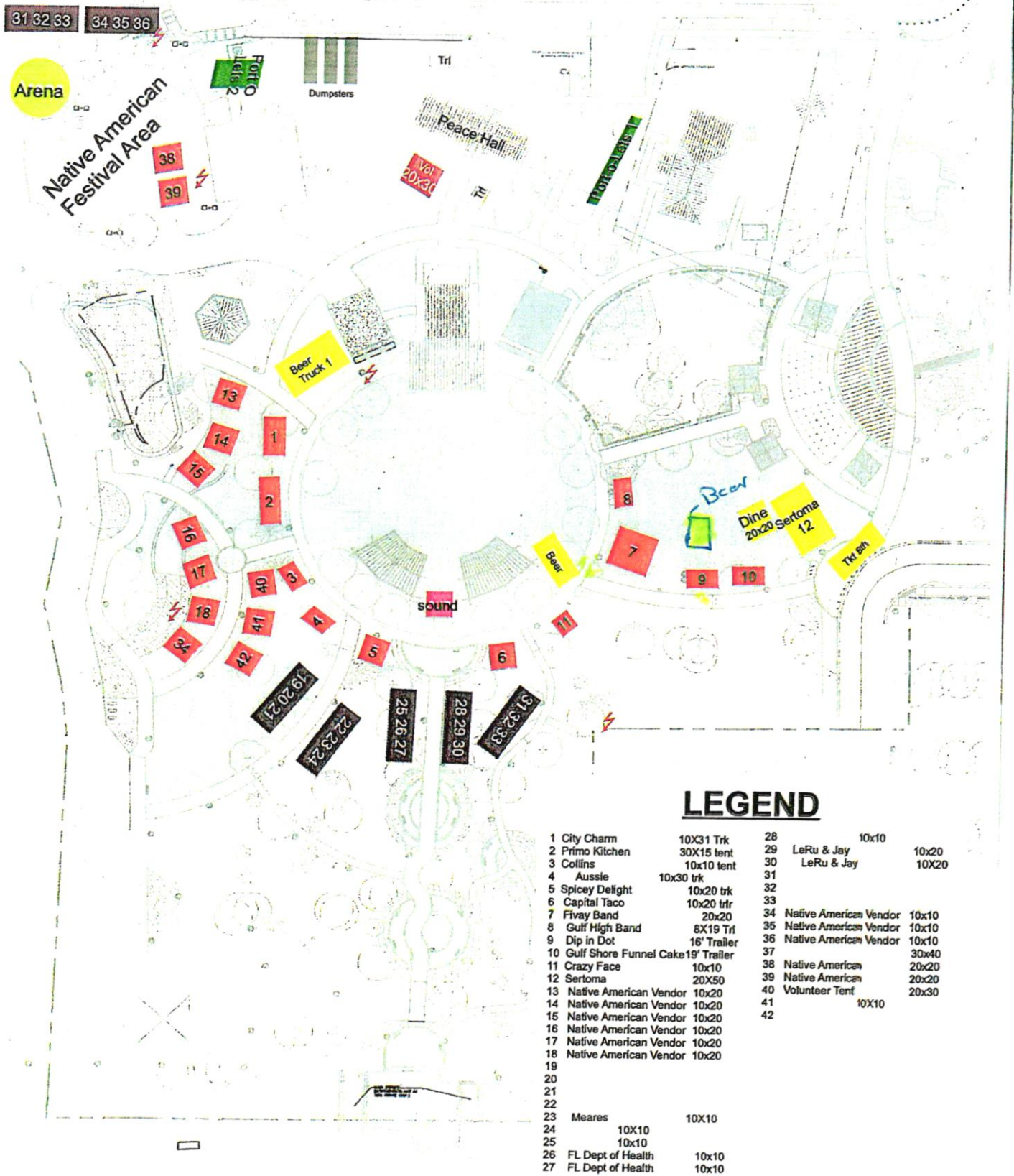
Note: College fraternities and sororities must meet certain additional conditions which can be found in the application instructions and requirements.

SECTION 5 – DESCRIPTION OF PREMISES TO BE LICENSED
AB&T AUTHORIZED SIGNATURE REQUIRED

Business Name (D/B/A) or Name of Event
WEST PASCO SERTOMA BEEF BBQ

Neatly draw a floor plan of the premises in ink, including sidewalks and other outside areas which are contiguous to the premises, walls, doors, counters, sales areas, storage areas, restrooms, bar locations and any other specific areas which are part of the premises sought to be licensed. A multi-story building where the entire building is to be licensed must show each floor plan.

Please see the attached
layout of Sim's Park. Beer
Station are marked in yellow!



Not To Scale
Dec 28, 2023

**SECTION 6 - AFFIDAVIT OF APPLICANT
FOR NON-PROFIT CIVIC ORGANIZATION ALCOHOLIC BEVERAGE PERMIT**

NOTARIZATION REQUIRED

Full Name of Applicant Organization
WEST PASCO SERTOMA CLUB, INC.

"This is to certify that the applicant requesting the permit in the above and foregoing application is a non-profit civic organization and that the permit, if used, will be used only by the organization making application, on the date(s) requested and at the location stated. This is to further certify that the applicant organization has not received more than three (3) permits within the calendar year, unless otherwise authorized by law, and agree that the location may be inspected and searched during the time that the permit is issued and business is being conducted without a search warrant by authorized agents or employees of the Division of Alcoholic Beverages and Tobacco, the Sheriff, his Deputies, and Police Officers for purposes of determining compliance with the alcoholic beverage laws.

I, the undersigned individual, hereby swear or affirm that I am an officer and duly authorized to make the above and foregoing statements on behalf of the applicant organization. Furthermore, I swear under oath or affirmation under penalty of perjury as provided for in Sections 559.791, 562.45, and 837.06, Florida Statutes, that the foregoing information is true to the best of my knowledge."

STATE OF Florida
COUNTY OF Pasco

APPLICANT SIGNATURE

APPLICANT SIGNATURE

The foregoing was () Sworn to and Subscribed OR () Acknowledged Before me this _____ Day

of _____, 20_____, By _____ who is () personally
known to me (print name(s) of person making statement)

OR () who produced _____ as identification.

Notary Public Commission Expires: _____



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Not For Profit Corporation
WEST PASCO SERTOMA CLUB, INC.

Filing Information

Document Number	733845
FEI/EIN Number	51-0252228
Date Filed	09/17/1975
State	FL
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	10/07/2017

Principal Address

14116 Marberry Way
Odessa, FL 33556

Changed: 03/09/2022

Mailing Address

P.O. BOX 1302
NEW PORT RICHEY, FL 34656

Changed: 04/10/2006

Registered Agent Name & Address

Rhinehart, HARVEY G
14116 Marberry Way
Odessa, FL 33556

Name Changed: 03/09/2022

Address Changed: 03/09/2022

Officer/Director Detail

Name & Address

Title Director

THOMPSON, STEVE MR
4606 DAPHNE ST
NEW PORT RICHEY, FL 34655

Title President

Huling, Darrell
6700 Rochelle Avenue
NEW PORT RICHEY, FL 34655

Title Secretary

Rhinehart, Harvey G
14116 Marberry Way
Odessa, FL 33556

Rhinehart, Harvey G
14116 Mariberry Way
Odessa, FL 33556

Annual Reports

Report Year	Filed Date
2021	01/10/2021
2022	03/09/2022
2023	02/04/2023

Document Images

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07/29/2002 -- ANNUAL REPORT	View image in PDF format
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02/21/1999 -- ANNUAL REPORT	View image in PDF format
02/09/1998 -- ANNUAL REPORT	View image in PDF format
09/16/1997 -- ANNUAL REPORT	View image in PDF format
01/25/1996 -- ANNUAL REPORT	View image in PDF format
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**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

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SECTION 1 -- CHECK TRANSACTION REQUESTED

Transaction Type:

☒ One/Two/Three Day Permit

☐ Special Sales License

SECTION 2 – LICENSE INFORMATION

Full Name of Applicant Organization (This is the name the license/permit will be issued in)
SERTOMA SPEECH & HEARING FOUNDATION OF FL, INC.

Department of State Division of Corporations Document #

FEIN Number
59-2182519

Business Name (D/B/A) or Name of Event
WEST PASCO BBQ

Location of Event (Street and Number)
6341 BANK STREET (Sim's Park)

City
New Port Richey

County
Pasco County

State
FL

Zip Code
34652

Mailing Address (Street or P.O. Box)
P.O. Box 1302

City
New Port Richey,

State
FL

Zip Code
34652

Contact Person
Debra Golinski

Telephone Number
727-808-2612 ext.

Email Address
debra@familyhearinghelp.org

Date(s) Permit Desired
March 27, 2023

March 28 ,2023

March 29, 2023

ABT District Office Received / Date Stamp

SECTION 3 – SALES TAX	
TO BE COMPLETED BY THE DEPARTMENT OF REVENUE	
Full Name of Applicant Organization SERTOMA SPEECH & HEARING FOUNDATION OF FL, INC.	
The named applicant for a license/permit has complied with the Florida Statutes concerning registration for Sales and Use Tax and has agreed to pay any applicable taxes due.	
Signed _____	Date _____
Title _____	
Department of Revenue Stamp:	

SECTION 4 - ZONING	
TO BE COMPLETED BY THE ZONING AUTHORITY GOVERNING THE EVENT LOCATION	
Location of Event (Street and Number) 6341 BANK STREET (Sim's Park)	
City New Port Richey	County Pasco
The location complies with zoning requirements for the temporary sale of alcoholic beverages pursuant to this application for a One/Two/Three Day Permit.	
Signed _____	Date <u>2/16/23</u>
Title <u>FLANWETZ</u>	

Note: College fraternities and sororities must meet certain additional conditions which can be found in the application instructions and requirements.

**SECTION 5 – DESCRIPTION OF PREMISES TO BE LICENSED
AB&T AUTHORIZED SIGNATURE REQUIRED**

Business Name (D/B/A) or Name of Event
SERTOMA SPEECH & HEARING FOUNDATION OF FL, INC.

Neatly draw a floor plan of the premises in ink, including sidewalks and other outside areas which are contiguous to the premises, walls, doors, counters, sales areas, storage areas, restrooms, bar locations and any other specific areas which are part of the premises sought to be licensed. A multi-story building where the entire building is to be licensed must show each floor plan.

Please See attache & layout of
Sim's Park Beer Station are
marked in yellow.

**SECTION 6 - AFFIDAVIT OF APPLICANT
FOR NON-PROFIT CIVIC ORGANIZATION ALCOHOLIC BEVERAGE PERMIT**

NOTARIZATION REQUIRED

Full Name of Applicant Organization

SERTOMA SPEECH & HEARING FOUNDATION OF FL, INC.

"This is to certify that the applicant requesting the permit in the above and foregoing application is a non-profit civic organization and that the permit, if used, will be used only by the organization making application, on the date(s) requested and at the location stated. This is to further certify that the applicant organization has not received more than three (3) permits within the calendar year, unless otherwise authorized by law, and agree that the location may be inspected and searched during the time that the permit is issued and business is being conducted without a search warrant by authorized agents or employees of the Division of Alcoholic Beverages and Tobacco, the Sheriff, his Deputies, and Police Officers for purposes of determining compliance with the alcoholic beverage laws.

I, the undersigned individual, hereby swear or affirm that I am an officer and duly authorized to make the above and foregoing statements on behalf of the applicant organization. Furthermore, I swear under oath or affirmation under penalty of perjury as provided for in Sections 559.791, 562.45, and 837.06, Florida Statutes, that the foregoing information is true to the best of my knowledge."

STATE OF Florida

COUNTY OF Pasco

APPLICANT SIGNATURE

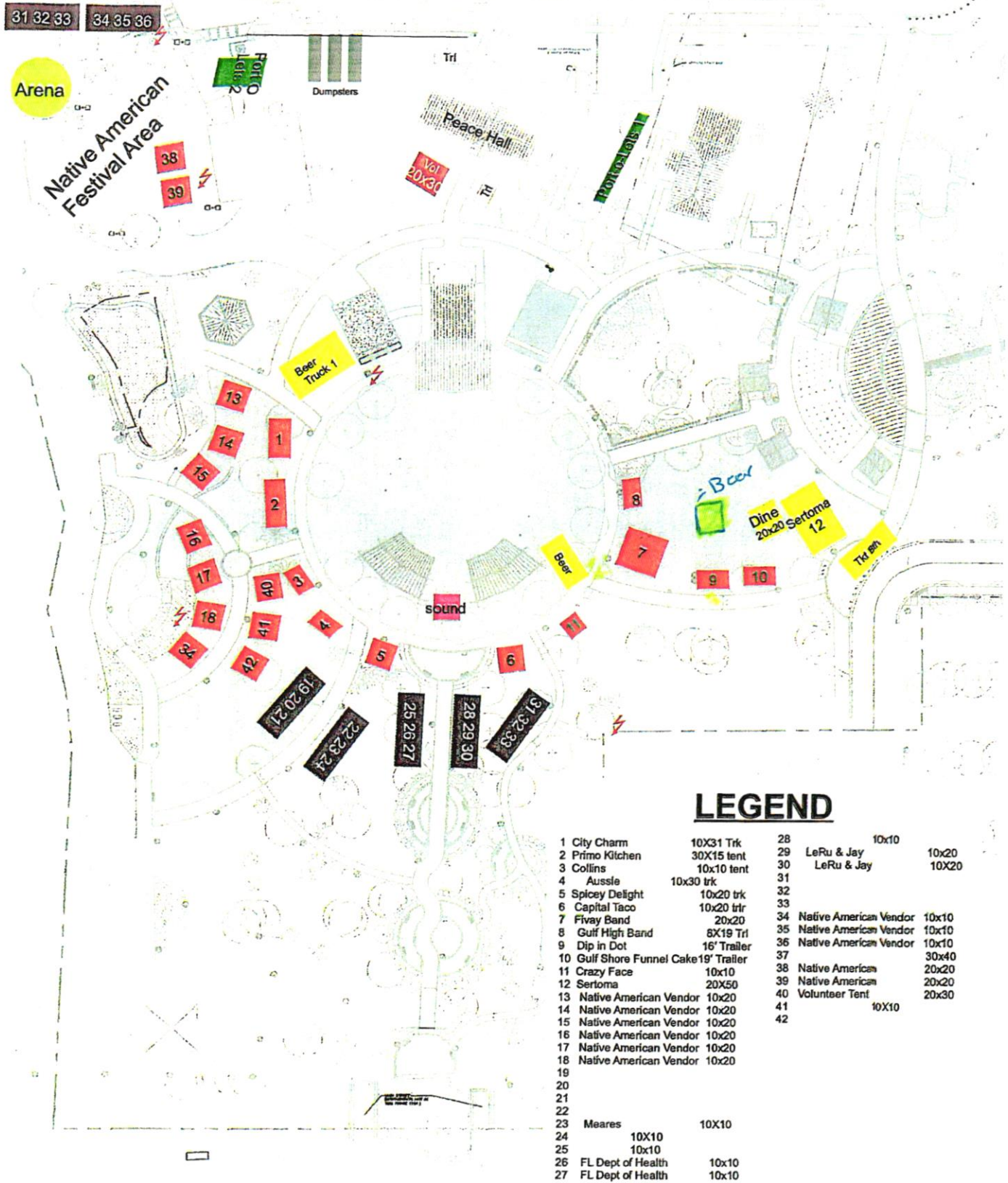
APPLICANT SIGNATURE

The foregoing was () Sworn to and Subscribed OR () Acknowledged Before me this _____ Day

of _____, 20_____, By _____ who is () personally
known to me (print name(s) of person making statement)

OR () who produced _____ as identification.

Notary Public Commission Expires: _____



Not To Scale
Dec 28, 2023



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Not For Profit Corporation

SERTOMA SPEECH & HEARING FOUNDATION OF FLORIDA, INC.

Filing Information

Document Number 762673
FEI/EIN Number 59-2182519
Date Filed 03/30/1982
State FL
Status ACTIVE
Last Event NAME CHANGE AMENDMENT
Event Date Filed 11/13/1989
Event Effective Date NONE

Principal Address

5211 US Hwy 19, Ste 200
NEW PORT RICHEY, FL 34652

Changed: 01/13/2023

Mailing Address

5211 US Hwy 19, Ste 200
NEW PORT RICHEY, FL 34652

Changed: 01/13/2023

Registered Agent Name & Address

Golinski, Debra
5211 US Hwy 19, Ste 200
NEW PORT RICHEY, FL 34652

Name Changed: 01/25/2016

Address Changed: 01/13/2023

Officer/Director Detail

Name & Address

Title President/CEO

Golinski, Debra
6333 River Road
NEW PORT RICHEY, FL 34652

Title Immediate Past Chairman

Olsen, David M
5211 US Hwy 19, Ste 200
NEW PORT RICHEY, FL 34652

Title Chairman

Rhinehart, Harvey
5211 US Hwy 19, Ste 200

Title Secretary

Nelson, Dale
5211 US Hwy 19, Ste 200
NEW PORT RICHEY, FL 34652

Title VC

Spence, Mark
5211 US Hwy 19, Ste 200
NEW PORT RICHEY, FL 34652

Title Treasurer

Callow, Justin
5211 US Hwy 19, Ste 200
NEW PORT RICHEY, FL 34652

Annual Reports

Report Year	Filed Date
2021	01/28/2021
2022	01/28/2022
2023	01/13/2023

Document Images

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02/06/2019 -- ANNUAL REPORT	View image in PDF format
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WEST PASCO SERTOMA CLUB INC.

Department of State Division of Corporations Document #

FEIN Number
51-0252228

Business Name (D/B/A) or Name of Event
WEST PASCO SERTOMA CHICKEN BBQ

Location of Event (Street and Number)
6341 BANK STREET (Sim's Park)

City
New Port Richey

County
Pasco County

State
FL

Zip Code
34652

Mailing Address (Street or P.O. Box)
P.O. Box 1302

City
New Port Richey,

State
FL

Zip Code
34652

Contact Person
Debra Golinski

Telephone Number
727-808-2612 ext.

Email Address
debra@familyhearinghelp.org

Date(s) Permit Desired
March 30, 2023

March 31, 2023

April 01, 2023

ABT District Office Received / Date Stamp

SECTION 3 – SALES TAX	
TO BE COMPLETED BY THE DEPARTMENT OF REVENUE	
Full Name of Applicant Organization WEST PASCO SERTOMA CLUB, INC.	
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Title _____	
Department of Revenue Stamp:	

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TO BE COMPLETED BY THE ZONING AUTHORITY GOVERNING THE EVENT LOCATION	
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Signed <u>C.S.</u> _____ Date <u>2/16/25</u>	
Title <u>PLANNER</u> _____	

Note: College fraternities and sororities must meet certain additional conditions which can be found in the application instructions and requirements.

SECTION 5 – DESCRIPTION OF PREMISES TO BE LICENSED
AB&T AUTHORIZED SIGNATURE REQUIRED

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WEST PASCO SERTOMA CHICKEN BBQ

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Please see The attached layout
of Sim's Park Beer Station
are marked in yellow.