

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 726551**

1. Entity Name

PASCO POLICE ATHLETIC LEAGUE, INC.**FILED****Mar 07, 2000 8:00 am**
Secretary of State

03-07-2000 90019 039 ****61.25

C I T I Z E N



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

8700 CITIZENS DR
NEW PORT RICHEY FL 346548700 CITIZENS DR
NEW PORT RICHEY FL 34654-5501

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

59-1859886

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

CANNON, LEE
8700 CITIZEN DRIVE
NEW PORT RICHEY FL 34654

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 **Sheriff Lee Cannon**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/14/2000**FILE NOW:**
FEES ARE \$61.259. 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 **VPD** ☐ Delete
NAME **TED MOUNTS**
STREET ADDRESS **8200 TANGLE WOOD DR**
CITY-ST-ZIP **NEW PORT RICHEY FL 34669**TITLE **Executive Director** ☐ Change ☐ Addition
NAME **Lee Cannon**
STREET ADDRESS **8700 Citizen Drive**
CITY-ST-ZIP **New Port Richey, FL. 34654**TITLE **PD** ☐ Delete
NAME **WELCH, KLENNETH**
STREET ADDRESS **6516 VAN BUREN STREET**
CITY-ST-ZIP **NEW PORT RICHEY FL 34653**TITLE **President** ☒ Change ☐ Addition
NAME **Teddy J. Mounts**
STREET ADDRESS **8200 Tanglewood Drive**
CITY-ST-ZIP **New Port Richey, FL. 34654**TITLE **TD** ☐ Delete
NAME **WELCH, DEBBIE**
STREET ADDRESS **6516 VAN BUREN STREET**
CITY-ST-ZIP **NEW PORT RICHEY FL 34653**TITLE **Vice President** ☒ Change ☐ Addition
NAME **Lee Mahon**
STREET ADDRESS **38110 Salem Avenue**
CITY-ST-ZIP **Zephyrhills, FL. 33541**TITLE **VPD** ☐ Delete
NAME **RYAN, BOB**
STREET ADDRESS **3710 SIMPSON CT**
CITY-ST-ZIP **PALM HARBOR FL 34684**TITLE **Vice President** ☐ Change ☐ Addition
NAME **Bob Ryan**
STREET ADDRESS **3710 Simpson Court**
CITY-ST-ZIP **Palm Harbor, FL. 34684**TITLE **SD** ☐ Delete
NAME **TIRRELL, EMILY**
STREET ADDRESS **3504 CONNON DRIVE**
CITY-ST-ZIP **NEW PORT RICHEY FL 34652**TITLE **Sheriff's Office Liaison** ☐ Change ☒ Addition
NAME **Orville Williamson**
STREET ADDRESS **8700 Citizen Drive**
CITY-ST-ZIP **New Port Richey, FL. 34654**TITLE **ED** ☐ Delete
NAME **CANNON, LEE**
STREET ADDRESS **8700 CITIZENS DR.**
CITY-ST-ZIP **NEW PORT RICHEY FL 34654**TITLE **Secretary** ☐ Change ☐ Addition
NAME **Emily Terril**
STREET ADDRESS **11850 Bethwood Avenue**
CITY-ST-ZIP **New Port Richey, FL. 34654**

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: **Sheriff's Office Liaison Orville Williamson**