

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90178 003 ****61.25

DOCUMENT # 734523

1. Entity Name

PLANTATION ATHLETIC LEAGUE, INC.



Principal Place of Business

**P.O. BOX 16303
PLANTATION FL 33318**

Mailing Address

**P.O. BOX 16303
PLANTATION FL 33318**

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 **23-7049795**

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

**GREENDENG, CARY
1441 NW 94 AVE.
FORT LAUDERDALE FL 33322**

Name: **John S. Bush**

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

8181 W. Broward Blvd., Suite 350

City **Plantation**

FL

Zip Code
33324

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VD** ☐ Delete
NAME **BZOEK, BILL**
STREET ADDRESS **541 SW 63RD TERRACE**
CITY-ST-ZIP **PLANTATION FL 33317**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☐ Delete
NAME **COOPER, MARTY**
STREET ADDRESS **850 SW 87 AVE.**
CITY-ST-ZIP **FORT LAUDERDALE FL 33324**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☒ Delete
NAME **GREENBERG, CARY**
STREET ADDRESS **1441 NW 94TH AVENUE**
CITY-ST-ZIP **PLANTATION FL 33322**

TITLE ☐ Change ☒ Addition
NAME **John S. Bush**
STREET ADDRESS **8181 W. Broward Blvd., Suite 350**
CITY-ST-ZIP **Plantation, FL 33324**

TITLE **SD** ☐ Delete
NAME **GREENWOOD, JO ANN**
STREET ADDRESS **7741 NW 13 CT.**
CITY-ST-ZIP **FORT LAUDERDALE FL 33321**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE REQUIRED

1-17-03

954 474 4100

CR2E037 (10/02)