

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 767079

1. Entity Name

PERDIDO BAY YOUTH SPORTS ASSOCIATION, INC.

FILED
May 30, 2000 8:00 am
Secretary of State

05-30-2000 90068 018 ****70.00

Principal Place of Business

Mailing Address

P.O. BOX 34469
PENSACOLA FL 32507

P.O. BOX 34469
PENSACOLA FL 32507-4469

2. Principal Place of Business

13705 Sorrento RD

3. Mailing Address

P.O. BOX 34060

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pensacola FL

City & State

Pensacola FL

Zip

Country

Zip

Country

32507

32507

4. FEI Number

59-3395400

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MOONEY, JAMES
1915 MERLIN ROAD
PENSACOLA FL 32506

7. Name and Address of New Registered Agent

Name Thomas J. LaConte JR

Street Address (P.O. Box Number is Not Acceptable)
11440 HAVBURG DR

City Pensacola

FL

Zip Code 32506

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

Thomas J. LaConte JR Secretary

03/30/2000

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

TITLE PD
NAME MOONEY, JAMES
STREET ADDRESS 1915 MERLIN ROAD
CITY-ST-ZIP PENSACOLA FL 32506 ☐ Delete

TITLE VD
NAME PARSHALL, WILLIAM
STREET ADDRESS 5820 SANDVIEW DR
CITY-ST-ZIP PENSACOLA FL 32507 ☐ Delete

TITLE TD
NAME MOONEY, ANN
STREET ADDRESS 1915 MERLIN ROAD
CITY-ST-ZIP PENSACOLA FL 32506 ☐ Delete

TITLE SD
NAME GORDON, PAMELA
STREET ADDRESS 1205 BRIDGECREEK TERRACE
CITY-ST-ZIP PENSACOLA FL 32506 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME Henry GILES
STREET ADDRESS 3555 Nighthawk Ln
CITY-ST-ZIP PENSACOLA, FL 32506

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

TITLE TP ☒ Change ☐ Addition
NAME Carlos Garcia
STREET ADDRESS 2300 Athens Ave
CITY-ST-ZIP Pensacola, FL 32507

TITLE SD ☒ Change ☐ Addition
NAME Thomas LaConte JR
STREET ADDRESS 11440 Havburg Dr
CITY-ST-ZIP Pensacola, FL 32506

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

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

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: Thomas J. LaConte JR

03/30/2000

850 455-7701

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #