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

03-11-2004 90010 011 ****61 25 N06594

FILED

DOCH	MENT # 1/06594	7	Civil College	-a1.		
1. Entity Nan	ne Transfer in the second of t		04 MAR 30 PM 2: 02			
1		2:02				
WILTON MANORS BASEBALL, INC				100 30 641		
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	DO NOT WRITE	IN THIS S	PACE		reformities fill	17 01
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2 Principal D	Popp of Puriness	3. Mailing Address	Contract of the Contract of th		5	4016940
2675 NT 7-1 A		•	(•		
		105 A1mar D: Suite, Apt. #, etc.	rive	DO NOT WRITE IN THIS SPACE		
City & State Wilton Manors, Fl.		City & State		4. FEI Number	0.0400510	Applied For
		Wilton Man			9-2488512	Not Applicable
Zip 3333	Country USA	Zip	Country	5. Certificate of S	latus Desired 📋	\$8.75 Additional
) USA	33334	USA	7. Name and Addr		
7. Name and Address of Current Registered Agent Name						
	·····DO NOTEWI	DITE	B:	renda Blume		
37.00	THE RESERVE THE COMMENT OF THE PROPERTY OF THE PROPERTY OF THE PARTY OF THE PROPERTY OF THE PARTY OF THE PART	CONTRACTOR	Street Address	(P.O. Box Numberls I 241 NW 24th	Street	
IN THIS SPACE Wilton Manors, Fl 33311						
			City	wilton Mano		Zip Code
1,010,010,000,000					FL	
the obligation	named entity submits this statement for tions of registered agent.	the purpose of changing it	s registered office or regist			
	A ST	2//		6U	0031369	Sills Ar I
V	Oxenda (1)	11110		037307	704010123-99	5-70-99/23
SIGNATURE	Signature, typed or printed name of registered agent an	id hitle if applicable. (NO	TE: Registered Agent signature requir	red when reinstating)	DATE	
(10)	FEE IS \$61.25		mpaign Financing Contribution.	\$5.00 May Be	Make Check	
	Initial or Amended UBR	nost rund	Contraduction.	Added to Fees	Florida Depart	ment of State
10.	OFFICERS AND DIRE	CTORS	manufactures and the control of the			
THILE	Brenda Blume		time to the last	friday and the	SVISTAL SECTION SIL	2 404 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
NAME CTREET LODGECO	241 NWc 24th st		NAME			1200
STREET ADDRESS CITY-ST-ZIP	Wilton Manors F1 . 3	3311	STREET ADDRESS			
TIME	V		int.			CRZE037B
NAME	V Robert Blume		NAME			8
STREET ADDRESS	241 NW 24th Street		STREET ADDRESS			C. T. S.
CITY-ST-ZIP	Wilton Manors, Fl 3		CITY ST ZIP			
TITLE		२२ । ।	31:01			
NAME		3311	ine.			
	S Beth Schotanus	3311	TITLE			
STREET ADDRESS	Seth Schotanus 208 NE_28th_Ct		NAME:	- DO	NOT WELL	
CITY-ST-ZIP	Beth Schotanus 208 NE 28th Ct. Wilton Manors F1. 333		TITLE MANE STREET ADDRESS GIT-ST-OR		NOT WRIT	2 Carried Sept. 10 Carried 1995, 2 Carried
	Beth Schotanus 208 NE_28th_Ct. Wilton Manors.Fl. 333		TITLE MANE SIDET ADDRESS GIT-ST-DR TITLE			2 Carried Sept. 10 Carried 1995, 2 Carried
CITY-ST-ZIP TITLE NAME STREET ADDRESS.	Beth Schotanus 208 NE 28th Ct. Wilton Manors F1. 333		TITLE MANE STREET ADDRESS GIT-ST-OR		NOT WRIT	2 Carried Sept. 10 Carried 1995, 2 Carried
CITY-ST-ZIP TITLE NAME	Beth Schotanus 208 NE_28th Ct. Wilton Manors.Fl. 333 T Wayne E. Schotanus	334	TITLE MANE SIDERT ADDRESS GIT-ST-DR TITLE NAME			2 Carried Sept. 10 Carried 1995, 2 Carried
CITY-ST-ZIP TITLE NAME STREET ADDRESS. CITY-ST-ZIP TITLE	Beth Schotanus 208 NE 28th Ct. Wilton Manors.Fl. 333 T Wayne E. Schotanus 105-Almar Drive	334	TOTAL NAME STREET ADDRESS OUT STOR TOTAL NAME STREET ADDRESS OUT ST. ZP			2 Carried Sept. 10 Carried 1995, 2 Carried
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12. I hereby certify that the information supplied with this filling 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 on an attachment with an address, with all other like empowered.

CTTY: ST: ZIP

SIGNATURE:

CRY-ST-ZIP

SIGNING OFFICER OF DIRECTOR

954-398-210