2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2000 8:00 am
Secretary of State
03-15-2000 90109 022 ****61.25

DOCUMENT # N24563

1. Entity Name

MIAMI SPRINGS AREA LITTLE LEAGUE, INC.

Principal Place of Business	Mailing Address
8033 NW 36TH ST. #438 MIAMI FL 33166	PO BOX 661315 MIAMI SPRINGS FL 33266-1315

DO NOT WRITE IN THIS SPACE

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 65-0103237 ☐ 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
CURTIS, THOMAS N 8033 NW 36TH ST. #438 MIAMI FL 33166	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 _____
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CURTIS, THOMAS N 8033 NW 36TH ST. #438 MIAMI FL 33166	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SHAPIRO, JOHN 1110 IBIS AVE. MIAMI FL 33166	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Rinehart, Clark 1171 Swan Ave Miami Springs, FL 33166	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T RINEHART, CLARK 1171 SWAN AVE. MIAMI SPRINGS FL 33166	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Hill, Charles 841 Heron Ave Miami Springs, FL 33166	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S COX, TIM 81 HOUGH DR. MIAMI FL 33166	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Rinehart, Yvonne 1171 Swan Ave Miami Springs, FL 33166	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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 Curtis 3/9/00 305 5940508
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #