

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2001 8:00 am
Secretary of State

03-14-2001 90523 043 ****61.25

DOCUMENT # N43654

1. Entity Name

PALM BEACH SOCCER LEAGUE, INC.

Principal Place of Business

Mailing Address

% ARNOLD E. THOMPSON
 1307 N.W. 8TH COURT
 BOYNTON BEACH FL 33426

% ARNOLD E. THOMPSON
 1307 N.W. 8TH COURT
 BOYNTON BEACH FL 33426

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

65-0325764

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

THOMPSON, ARNOLD E.
 1307 N.W. 8TH COURT
 BOYNTON BEACH FL 33426

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 SHAW, RAY 117 KINGS WAY ROYAL PALM BEACH FL 33411	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PECK, ENVER 9019 CYPRESS HOLLOW DRIVE WEST PALM GARDENS FL 33418	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ROCABADO, NANCY 6324 BARTON CREEK CIR. LAKE WORTH FL 33463	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD THOMPSON, ARNOLD 1307 N.W. 8TH CT. BOYNTON BCH FL 33426	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROCABADO, NANCY 6324 BARTON CREEK CIR LAKE WORTH, FL 33463	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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:

Arnold E. Thompson
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ARNOLD E. Thompson 3/11/01 (561) 737-4076

Date

Daytime Phone #

CR2E037 (10/00)