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## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

## May 02, 2001 8:00 am Secretary of State **DOCUMENT # N46995** MELBOURNE EAU GALLIE UNITED SOCCER ASSOCIATION, 05-02-2001 90052 028 \*\*\*\*61.25 Principal Place of Business Mailing Address 1801 N WICKHAM RD PO BOX 120125 MELBOURNE FL 32935 WEST MELBOURNE FL 32912-0125 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3103275 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MCCLELLAND, CLIFTON A. JR. Street Address (P.O. Box Number is Not Acceptable) 700 SOUTH BABCOCK STREET SUITE 400 **MELBOURNE FL 32901** 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, lyped or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TREASURER ☐ Change **Addition** TITLE Delete TITLE Ellen Daneu 1041 P. edmont Aux NE GARVER, JERRI NAME NAME 649 MANOR PL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Palm Bay FL 32907 CITY-ST-7IP MELBOURNE FL 32901 TITLE Delete TITLE Change Addition HAYES, TOM NAME NAME 2574 KINGSMILL AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MELBOURNE FL 32934 TITLE Change Addition Delete\_ TITLE STERN, ERIC NAME -NAME STREET ADDRESS 5305 LAGUNA VISTA DR STREET ADDRESS CITY-ST-ZIP HOSFORD FL 32334 CITY-ST-ZIP Delete Secretary Addition TITLE TITLE ☐ Change DURBIN, FRANK NAME NAME Mark Chapman STREET ADDRESS 1443 ALBERNI ST NW STREET ADDRESS 2906 PABLICLER ST melbourne, FC32935 CITY-ST-ZIP PALM BAY FL 32907 CITY-ST-ZIP Delete TITLE ☐ Change NAME IEZZI, STEVE NAME STREET ADDRESS 3530 SERENITY LN STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP MELBOURNE FL 32934 TITLE ☐ Delete TITLE Change □ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.