

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2000 8:00 an
Secretary of State

02-08-2000 90172 039 ****70.00

DOCUMENT # N94000001728

1. Entity Name

SPECIAL ATHLETE BOOSTERS, INC.

Principal Place of Business

Mailing Address

1701 DESOTO ROAD
 SARASOTA FL 34234

1701 DESOTO ROAD
 SARASOTA FL 34234-3066

00017362

2. Principal Place of Business

3. Mailing Address

7015 Professional Pkwy. E.
 Suite, Apt. #, etc.

7015 Professional Pkwy. E.
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

Sarasota, FL

Sarasota, FL

4. FEI Number

65-0488256

Applied

Not App

Zip

Country

Zip

Country

34240

USA

34240

USA

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

PATTERSON, JOHN
 46 N WASHINGTON BLVD #1
 SARASOTA FL 34236

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

+ 8.75

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 PD
 NAME COX, JOHN
 STREET ADDRESS 1701 DESOTO ROAD
 CITY-ST-ZIP SARASOTA FL ☐ Delete

TITLE PD
 NAME Cox, John
 STREET ADDRESS 7015 Professional Pkwy. E.
 CITY-ST-ZIP Sarasota, FL 34240 ☒ Change ☐

TITLE TD
 NAME SMITH, PETER
 STREET ADDRESS 2 N. TAMiami TRAI, STE. 604
 CITY-ST-ZIP SARASOTA FL ☐ Delete

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

TITLE V
 NAME FROST, KLAUS
 STREET ADDRESS 2363 INDUSTRIAL BLVD
 CITY-ST-ZIP SARASOTA FL 34234 ☐ Delete

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

TITLE V
 NAME HOSENFELT, ROBERT
 STREET ADDRESS 2595 DICK WILSON DR
 CITY-ST-ZIP SARASOTA FL 34240 ☐ Delete

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

TITLE S
 NAME KIMBROUGH, ROBERT
 STREET ADDRESS 1530 CROSS ST
 CITY-ST-ZIP SARASOTA FL 34236 ☐ Delete

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

TITLE D
 NAME MILLER, MICHAEL
 STREET ADDRESS 395 COMMERCIAL CT #A
 CITY-ST-ZIP VENICE FL 34292 ☐ Delete

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

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 11, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

1/18/00

941-365-06