2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

				1			•	:			
DOCÜMENT # N9800005242 1. Entity Name						FILED					
LIBERTY COUNTY SPORTS, INC.				* » %#		00 OCT 30 AM II: 05					
Principal Plac					CEODE (E.D.)	OF STATE					
Principal Place of Business Mailing Address P.O. 80X 95 P.O. BOX 95						SECRETARY OF STATE. TALLAMASSEE, FLORIDA					
BRISTOL FL 32321 BRISTOL FL 32321											
										1111	
2. Principal P	lace of Business	3. Mailing Address									
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & Stat	е	City & State			4	. FEI Number	59-3532935	-	Applied Not App		
Zip	Country	Zip	Country			5. Certificate of Status Desired Sa.75 Additional Fee Required					
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent							
\				Name JXXI Bailey						_	
BROCK-REVELL, CATHY				Street A	Street Address (P.O. Box Number is Not Acceptable)						
PEA RIDGE ROAD				Ω.	2 ha	72806	2	·····			
BRISTOL FL 32321				City O		x-389f		FL Zip	 3321		
8. The above named entity submits this statement for the purpose of changing its reg					Drist)	in the state of Flori		7 351		
o. The above	named entity submits this statement to	r the purpose of changing its r	egister	ea onice or	r registereu i	agent, or both	, in the state of Fion	ua.			
(and Project of Durance Santil son											
SIGNATURE .	Signature, typed or printed name of registered agent	nd title if applicable. (NOTE:	Registere	d Agent signat	ture required whe	n reinstating)		DATE	<u> </u>	-	
	<u> </u>	<u></u>		 							
FILE NOW: FEE IS \$61.25 After September 13, 2000 min. will be \$236.25 9. Election Campai Trust Fund Cont				~ -	- 40,00 may be						
10.	OFFICERS AND DIF	ECTORS	11.		ADI	 DITIONS/CHAI	NGES TO OFFICER	S AND DIRECTOR	S IN 10		
TITLE	D	Delete	TITL			-		Char	ge 🗀 A	Addition	
NAME STREET ADDRESS	MCCOY, RAY RT. 3 BOX 92 HWY 20 W.		NAM	ET ADDRESS	_ 、	- 0	, 4				
CITY-ST-ZIP	BRISTOL FL 32321			-ST-ZIP	11)()	4121	, ,				
TITLE	D	☐ Delete	TITL	E		1:1_		☐ Chai	ige 🔲 /	Addition	
NAME	READ, DONNIE			ET ADDRESS :		7000034729379					
STREET ADDRESS CITY-ST-ZIP	LAKE MYSTIC RD. Bristol Fl 32321			-ST-ZIP	Í	-11/21/8001079014 *****61.25 ******61.25					
TITLE -	D	Defete	TITL	E	Treas	urer		☐ Char		Addition	
NAME	REVELL, TIM		NAM		Jodi	Bailty Bx 389#					
STREET ADDRESS CITY-ST-ZIP	HWY 379-C Bristol Fl 32321			ET ADDRESS -ST-ZIP	Brish	1, 151.35	2321				
TITLE	P	Delete	TITL	E :	Praide	ent		Char	ge 🐠	dition	
Name	BROCK-REVELL, CATHY		NAM	_	Richa	أاللاما أور	ams				
STREET ADDRESS CITY-ST-ZIP	P.O. BOX 926 PEA RIDGE RD. BRISTOL FL 32321			ET ADDRESS - ST-2/P	Po Box	1, FI :	37371			-	
TITLE	VP	Delete	TITL			resider		Cochar	ne 15	an linn	
NAME	20000			E	Steve	. Cook		J. Olka	o- 		
STREET ADDRESS	P.O. BOX 210 SUMMER RD.			ET ADDRESS	K 3 F	30x 34x	l			}	
CITY-ST-ZIP	Brito For Frederic			-ST-ZIP	Serve	<u> 11 1 32</u>	321	F	no .)==4	dditios	
TITLE .	BURKE, TERESA	☑ Delete	TITLI NAM			in Rev		⊿ Char	ge 😘	HOSHION	
STREET ADDRESS P.O. BOX 304 HWY 67				ET ADDRESS		30x 338				1	
CITY-ST-ZIP	HOSFORD FL 32334			-ST-ZIP	Ŀ <u> </u>	ol, Pl. 3					
indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo or on an attachment with an address, v	true and accurate and that my wered to execute this report a	/ signa	ture shall h	ave the sam	e legal effect a	as if made under oa	th; that I am an off	cer or dire	ctor	
	or on an attachment with an address w	min all other like empowered									

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