

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 702459

1. Entity Name

LAKE WORTH YOUTH BASEBALL LEAGUES INC

**FILED**  
**Mar 22, 2000 8:00 am**  
**Secretary of State**

03-22-2000 90099 040 \*\*\*\*61.25

Principal Place of Business

Mailing Address

900 NORTH 22ND AVE  
LAKE WORTH FL 33460

900 NORTH 22ND AVE  
LAKE WORTH FL 33460-6175

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

23-7134303

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

FOLEY, STEVE  
2901 FRENCH AVENUE  
LAKE WORTH FL 33461

Name

~~FOLEY, STEVE~~ Fountain, Dan

Street Address (P.O. Box Number is Not Acceptable)

7200 West Lake Dr.

City

W. Palm Bch

FL

Zip Code

33406

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

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Department of State**

**FILE NOW:  
FEE IS \$61.25**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
	PD			
	FOLEY, STEVE	2901 FRENCH AVENUE	LAKE WORTH FL 33461	
	VPD			<input type="checkbox"/> Delete
	SCHNEIDER, PATRICK	4646 BLUE PINE CIR	LAKE WORTH FL 33463	
	TD			<input checked="" type="checkbox"/> Delete
	MICLEAN, MARK	707 CHILLINGWORTH DRIVE	WEST PALM BEACH FL 33409	
	President			<input type="checkbox"/> Delete
	Dan Fountain	7200 West Lake Dr.	West Palm Bch, FL 33406	
	VPD			<input type="checkbox"/> Delete
	Larry Caraccio	5421 Sandhurst Cir	Lakewood, FL 33463	
	TO Teri Cargnan	3014 Giuliano Dr.	Lake Worth, FL 33461	<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Dan Fountain Pres. 2/9/00 561-642-2569

CR2E037 (9/99)