## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 19, 2001 8:00 am <sup>§</sup> Secretary of State **DOCUMENT # 702898** 1. Entity Name FLORIDA LEAGUE OF CITIES, INCORPORATED 04-19-2001 90076 047 \*\*\*\*61.25 Principal Place of Business Mailing Address 301 S. BRONOUGH STREET 301 S. BRONOUGH STREET P.O. BOX 1757 P.O. BOX 1757 ぜいひょりて TALLAHASSEE FL 32302-1757 TALLAHASSEE FL 32302-1757 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-6001124 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) SITTIG, MICHAEL 301 S. BRONOUGH ST. TALLAHASSEE FL 32301 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be **Department of State** Trust Fund Contribution. Added to Fees. FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME RIGSBY, HON, DAVID NAME STREET ADDRESS STREET ADDRESS 120 S. FLORIDA AVE CITY-ST-ZIP CITY-ST-ZIP DELAND FL 32720 D TITLE Change ☐ Addition ☐ Delete TITLE SCHULTZ, HON. L NAME NAME 1820 LAUREL OAK DRIVE, SOUTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP .CITY-ST-ZIP ROCKLEDGE FL ----TITLE ☐ Change ☐ Addition Delete TITLE NAUGLE, HON J NAME NAME STREET ADDRESS STREET ADDRESS 100 N. ANDREWS AVE. CITY-ST-ZIP CITY-ST-7IP FT. LAUDERDALE FL PP X Change ☐ Addition ☐ Delete TITLE TITLE SATCHEL, HON. FRANK R JR. NAME NAME STREET ADDRESS 806 SE 3RD ST STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **MULBERRY FL 33860** Change TITLE ☐ Delete TITLE ☐ Addition FERRERI, HON S NAME NAME STREET ADDRESS 5985 10TH AVE. NORTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GREEN ACRES FL TITLE TITLE X Change ☐ Addition ☐ Delete

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

STREET ADDRESS

CITY-ST-7IP

NAME

NAME

STREET ADDRESS

CITY-ST-7IP

MADDOX, HON. SCOTT

TALLAHASSEE FL 32301

300 S ADAMS ST