

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 708631

FILED  
Apr 19, 2003  
Secretary of State

Entity Name: INDIAN RIVER COUNTY LITTLE LEAGUE, INC.

**Current Principal Place of Business:**

3995 18TH STREET  
P.O. BOX 2519  
VERO BEACH, FL 329619519

**New Principal Place of Business:**

**Current Mailing Address:**

3995 18TH STREET  
P.O. BOX 2519  
VERO BEACH, FL 32961 US

**New Mailing Address:**

FEI Number: 59-0950327      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HINTON, PATTY  
3176 62ND DRIVE  
VERO BEACH, FL 32966

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: KOPPELMAN, KEVIN  
Address: 185 49TH AVE  
City-St-Zip: VERO BEACH, FL 32968

Title: SD (X) Delete  
Name: KOPPELMAN, RENE  
Address: 189 49TH AVENUE  
City-St-Zip: VERO BEACH, FL 32968

Title: TD ( ) Delete  
Name: HERD, CHRIS  
Address: 725 34TH COURT SW  
City-St-Zip: VERO BEACH, FL 32966

Title: PD ( ) Delete  
Name: HINTON, PATTY  
Address: 3176 62ND DRIVE  
City-St-Zip: VERO BEACH, FL 32966

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition  
Name: CARLTON, VICKY  
Address: 905 52 AVENUE  
City-St-Zip: VERO BEACH, FL 32962

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: ENRICO, JEANNE  
Address: 185 14 AVENUE  
City-St-Zip: VERO BEACH, FL 32962

Title: PD (X) Change ( ) Addition  
Name: WHITTINGTON, PENNY  
Address: 1413 32 AVENUE SW  
City-St-Zip: VERO BEACH, FL 32968

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PENNY WHITTINGTON

PD

04/19/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date