

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 711062

FILED
Apr 30, 2003
Secretary of State

Entity Name: INTERBAY LITTLE LEAGUE, INC.

Current Principal Place of Business:

P.O. BOX 13915
TAMPA, FL 33681 US

New Principal Place of Business:

6904 MACDILL AVE
TAMPA, FL 33611 US

Current Mailing Address:

P.O. BOX 13915
TAMPA, FL 33681 US

New Mailing Address:

FEI Number: 52-1234532 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDREWS, EDWARD D
7402 N. 56TH STREET., SUITE 480
TAMPA, FL 33617 US

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: PD () Delete
Name: TAYLOR, BYRON
Address: 4439 WALLACE AVE WEST
City-St-Zip: TAMPA, FL 33611

Title: VPD () Delete
Name: ULLERY, BRET
Address: 6705 GABRIELLE STREET
City-St-Zip: TAMPA, FL 33611

Title: SD () Delete
Name: LEATH, DEBORAH
Address: 4108 TREASURE CIRCLE
City-St-Zip: TAMPA, FL 33616

Title: TD () Delete
Name: ANDREWS, ED
Address: 2910 BAYSHORE VISTA DR
City-St-Zip: TAMPA, FL 33611

Title: SO () Delete
Name: JENNINGS, TIM
Address: 4229 W BAYVIEW AVE
City-St-Zip: TAMPA, FL 33611

Title: SV () Delete
Name: COX, SANDRA
Address: 5207 QUINCY
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOGSETT, BERNADETTE
Address: 4431 OHIO AVE
City-St-Zip: TAMPA, FL 33616

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

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

Title: TD (X) Change () Addition
Name: CARPENTER, ROBERT
Address: 4008 OKLAHOMA AVE
City-St-Zip: TAMPA, FL 33616

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

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

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: BERNADETTE HOGSETT

PD

04/30/2003

Electronic Signature of Signing Officer or Director

Date